

## PRIVATE LESSON REQUEST FORM

**Package of 4 Purchase Lessons:** (price per person)

Private Lesson 1-on-1: \$120 Regular / \$90 Resident  
Semi-Private 1-on-2: \$92 Regular / \$72 Resident

**Semi-private note:**

Please be sure that children taking semi-private lessons must be within 1 level difference.

- Complete and turn in form to Front Desk, please allow two (2) weeks for arranging of schedules.
- Sunset Empire will arrange an Instructor to call you to setup your lessons.
- Once the lessons have been scheduled, the customer must pay and present the receipt to the instructor before the first lesson can begin.

**Contact information:**

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Home / Cell / Work

Secondary Phone Number: \_\_\_\_\_ Home / Cell / Work

**Participant(s) information:**

	Name (First and Last)	Gender	Ages
#1		M / F	
#2		M / F	
Preferred Instructor: (If known)			

Special Requests: \_\_\_\_\_

Medical Concerns: \_\_\_\_\_

Goals / Objectives: \_\_\_\_\_

**Available times for lesson:**

Day	Morning (9am-12pm)	Afternoon (12pm-4pm)	Evening (4pm-8pm)
Monday			<i>This time is temporarily unavailable.</i>
Tuesday			
Wednesday			
Thursday			
Friday			

**Policy:**

Our private lessons are available by appointment only through request forms, dependent upon instructor availability. Upon submission of this request form, you will be placed on a waiting list to be contacted. Once schedules have been confirmed, payment is to be turned in on or before the start of your first lesson. Reschedule requests must be submitted by phone at least 24hrs prior to the lesson time. First time lesson reschedule is of no charge, \$15 rescheduling fee may occur for each rescheduling hereafter. No show or rescheduling made less than 24hrs prior to the lesson time will be rescheduled at the discretion of the instructor and may result in the loss of a lesson. Any lost lesson as a result will not be refunded.

By signing this form I certify that the above information is correct and the swimmer is in good health to swim in a chlorinated pool. I also understand that I have read and understand the above conditions and sign this form voluntarily.

\_\_\_\_\_  
Parent or Guardian or Swimmer Signature

\_\_\_\_\_  
Date

Instructor Name: \_\_\_\_\_

Date Assigned: \_\_\_\_\_

**Office Use only:**

Parent contact record (for lessons setup)			
Check each	Date contacted	Time contacted	Comment
<input type="checkbox"/> Contact 1			
<input type="checkbox"/> Contact 2			
<input type="checkbox"/> Contact 3			

**Use below to setup lessons, update when needed:**  
(Once set-up, please copy for participant/parent/guardian)

Lessons #	Date	Time
<input type="checkbox"/> Lesson 1		
<input type="checkbox"/> Lesson 2		
<input type="checkbox"/> Lesson 3		
<input type="checkbox"/> Lesson 4		
<input type="checkbox"/> Makeup 1 (if needed)		
<input type="checkbox"/> Makeup 2 (if needed)		

**Comments:**

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