

## Swim Instruction & Coaching Request Form

Please indicate:  Member  Non Member

Adult's name: \_\_\_\_\_ Date: \_\_\_\_\_

Child's name and age: (if applicable) \_\_\_\_\_

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

Phone number: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Work: \_\_\_\_\_ Emergency: \_\_\_\_\_

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

Reason for swim request: \_\_\_\_\_

Has the participant had swimming experience before?  YES  NO

If yes, please explain: \_\_\_\_\_

Goals & objectives: \_\_\_\_\_

Please list any physical restrictions, medications or information that might aid the instructor in assisting the participant to achieve the stated goals:

Days and times available for private lessons: \_\_\_\_\_

If you have additional questions, please contact the Member Services Desk 630.938.9000

**For private lessons, a Swim Instructor will contact you as soon as one becomes available to fit your scheduling needs.**

For Office Use Only  
Assigned to:  
On: