



Dolphin Swim School Inc.
1530 El Camino Avenue
Sacramento, CA 95815
(916) 929-8188
FAX (916) 928-3528

Please go over the rules with the students. Bring this letter signed on the first day of class.

Dolphin Safety Rules

1. NO RUNNING for any reason.
2. No eating, drinking, or smoking on the pool deck.
3. Children are to be with parent(s) or guardian while waiting for their classes to begin.
4. Children must stay out of the pool until their lesson begins (unless approved by their instructor).
5. Please try not to interfere while classes are in progress. This can cause a distraction for the instructor and other students.
6. Please shower before entering the pool.
7. All children under 3 years of age must wear a non-disposable swim diaper.

Attendance and Make-up Policy

1. Tuition is due at the time of registration.
2. ***Make-ups are \$16.00 per lesson.*** Classes will be rescheduled if the instructor is ill or unavailable
3. If you are aware one week in advanced that you will not be able to attend a full session for any reason please let us know and we will try to reschedule you for another session.
4. ***There are NO refunds.***

Release of Liability

I understand that swimming is a potentially hazardous activity. I understand that swim lessons involve the risk of injury. I hereby agree to freely and expressly assume and accept any and all risks of injury for myself, my children and any other persons whom I have enrolled to participate in swimming lessons. I agree that I will release Dolphin Swim School Inc. for any injuries relating to swimming instruction and/ or the use of its facilities. I hereby agree to the terms and conditions of this contract.

This document constitutes the final and entire agreement between Dolphin Swim School Inc. and undersigned. I have carefully read this agreement: the safety rules, attendance and make-up policy, and release of liability and fully understand its contents. I am aware that this is a release of liability and a contract between myself and Dolphin Swim School Inc. and I sign it of my own free will.

Student Signature (if over 18 years old),

Parent or Guardian: _____ Date _____

Address _____ City _____ Zip _____

Day Phone _____ Cell/Other Phone _____

Print Student(s) Name: _____
(First and Last)
