

**Child's information**

Name \_\_\_\_\_

Birthday \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Parent(s)/Guardian Name \_\_\_\_\_

Phone Number \_\_\_\_\_

In case of emergency contact \_\_\_\_\_

Phone \_\_\_\_\_ Relationship to Child \_\_\_\_\_

*Please indicate YES or NO with your initials the swim areas you feel comfortable having your child swim in. The Oak Lawn Park District Aquatic Staff has the right to change your child's swim form based on his/her ability demonstrated at the pool. Please indicate NO to the diving board if your child cannot swim in the deep end of the pool.*

\_\_\_\_\_ Yes \_\_\_\_\_ No baby pool

\_\_\_\_\_ Yes \_\_\_\_\_ No 3 feet – "big pool"

\_\_\_\_\_ Yes \_\_\_\_\_ No 4 feet – "big pool"

\_\_\_\_\_ Yes \_\_\_\_\_ No 5 feet – "big pool"

\_\_\_\_\_ Yes \_\_\_\_\_ No Diving Boards– "big pool"

\_\_\_\_\_ Yes \_\_\_\_\_ No Slide– "big pool"

Does your child know how to swim? \_\_\_\_\_ Yes \_\_\_\_\_ No

Has your child taken formal swim lessons? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please list any additional information that would be helpful to know about your child's swimming ability, swimming history and/or water experience in general.

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**Parent Signature** \_\_\_\_\_