





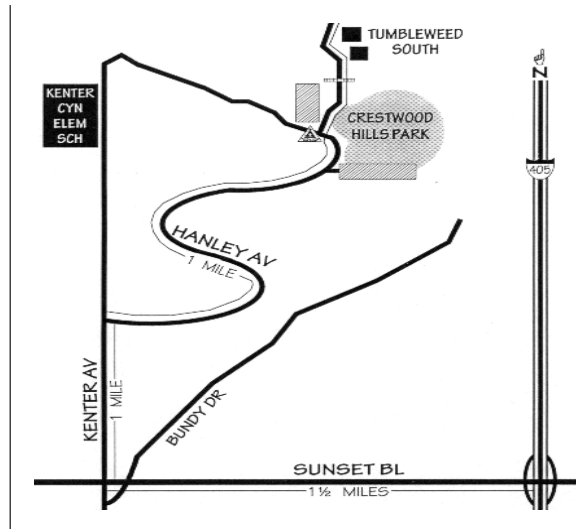


Tumbleweed Swim School - 2008

Bringing out the best in children for over 50 years!

Conveniently located in Brentwood!

-  **Six private lessons \$255**
-  **Each lesson is 30 minutes**
-  **Instruction for all levels and ages**
-  **Lessons are tailored to the needs of the swimmer**
-  **All instructors are certified by the American Red Cross**
-  **Beautiful outdoor heated pool**



Monday • Wednesday • Friday

Tuesday • Thursday

- | | |
|------------------------|----------------------------|
| M1... Apr 14 - 25 | M6 June 23 - July 2* |
| M2... April 28 - May 9 | M7 July 7 - 18 |
| M3... May 12 - 23 | M8 July 21 - August 1 |
| M4... May 28* - June 6 | M9 August 4 - 15 |
| M5... June 9 - 20 | |

- | | |
|---------------------------|----------------------------|
| T1 April 22 - May 8 | T4 June 24 - July 10 |
| T2 May 13 - 29 | T5 July 15 - 31 |
| T3 June 3 - 19 | T6 August 5 - 21 |



Sessions June 23 - August 22 are scheduled between 3:30 p.m. & 5:30 p.m.



*Pool will be *closed* May 26 and July 4, 2008. Tuition for sessions affected by the holidays will be prorated accordingly.

Lessons are scheduled on the hour and half hour. Full tuition is required for each block of six lessons at the time of enrollment. To guarantee the same instructor and/or times for multiple blocks, advance payment for all blocks is required. **There will be no refunds or cash adjustments for withdrawals, absences, or cancellations.** One makeup lesson is allowed per block on a space available basis for \$10 and we must be notified **24 hours in advance of your scheduled lesson.** Tumbleweed reserves the right to substitute instructors for makeups or instructor illness.

My signature on this application indicates that I have read and fully agree with all policies stated herein, and that the health information below is accurate to the best of my knowledge. In an emergency, Tumbleweed has my permission to obtain medical treatment including routine tests, x-rays, hospitalization, injections, anesthesia and/or surgery for me/my child. In addition, I understand that my choice of lesson is not reserved until Tumbleweed provides me with a formal confirmation.

SWIMMER'S NAME: _____ AGE: _____

PARENT/GUARDIAN NAME: _____ HOME PHONE: _____

ADDRESS: _____ WORK PHONE: _____

HEALTH PROBLEM(S): _____

SIGNATURE: _____ DATE: _____

SESSION CODE(S):	TIME DESIRED (on half-hour):
<input type="checkbox"/> ENCLOSED IS MY CHECK FOR PAYMENT IN FULL \$ _____	
<input type="checkbox"/> CHARGE PAYMENT TO MY VISA MASTERCARD	
CARD NUMBER	EXP.
V-Code	
SIGNATURE OF CARD HOLDER	
PRINT NAME OF CARD HOLDER	
STREET ADDRESS OF CREDIT CARD	ZIP CODE FOR CREDIT CARD

Does your child attend a Tumbleweed Camp this summer? (Circle) YES NO