

# 2009 Swim Registration Form

McCracken's Swim School ♦ 913-782-8555

\_\_\_\_\_  
Last Name Parents

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Home Phone Work or Cell Phone

**Participating Day Care** (if your child comes with the Daycare)

## Swimmers

Child 1 \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_

Child 2 \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_

Child 3 \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_

**Preferred Session(s):** \_\_\_\_\_ **Time:** \_\_\_\_\_

List any medical history we may need:

I, the undersigned parent or guardian of the above-named student, do hereby grant authority to the staff of McCracken's Gymnastics School, Inc. to render a judgement concerning medical assistance in the event of an accident or illness during my absence. I hold McCracken's Gymnastics School Inc., its teachers, staff and school harmless for all injuries arising to and from all activities. **I also understand there are no refunds or make-ups for lessons missed.**

\_\_\_\_\_  
**Signature of Parent or guardian** **Date**

Check/Credit	Office Use Only:	
	Day Received	Amount
A. _____	_____	_____
B. _____	_____	_____
C. _____	_____	_____
D. _____	_____	_____

**Payment Options:** Please mail this form with a check or credit card information entered below, **OR** bring form with check, cash, or credit card to our office.

Print name as on card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ **Visa - MasterCard**

← You may type this form on your computer and save it to your hard drive as your copy and reminder of your child's class Session/Time.

There is a **Save** and **Print** button at the bottom of the form.

Public Tuition: \$65.00 Per Student Per Session

Daycare Tuition: \$73.00 Per Student Per Session  
includes McCracken's Transportation

← Most of our classes fill early, so please call the office to confirm an available Session/Time, then enter it here.

← Please sign this form before mailing it to:

**McCracken's Swim School**  
**15515 S. Keeler St.**  
**Olathe, KS 66062**

We will call you when we receive the form.

If you wish to pay by credit card, we accept Visa and MasterCard.

We detach your Card information after we process your information, then retain it in a secure location off site.

If you want your copy of the transaction it will be in the office; only the last four digits of the card number are on it.

**Thank you for swimming with McCracken's Swim School!**