# SOUTHWEST MIDDLESEX SWIMMING POOL

138 NORTH STREET, GLENCOE, ON, N0L 1M0
TELEPHONE: (519)287-2839 FAX: (519)287-5165

**GENERAL INFORMATION**

**Name of Participant** ……..

**Name of Parent/Guardian** ……..

**Address (including 9-1-1 number)** ……..

……..……Postal Code……

**Telephone (Home)**……..**(Business)**……..……

**CLASS ENROLMENT**

**Last Class Passed** ……..

**Programs Enrolled In** ……..

**Dates of Session** ……..

**Start Time** ……..

**PAYMENT INFORMATION**

**Date of Registration** ……..

**Method of Payment** **Cash**…… **Cheque**……..

**Amount of Payment (including GST)** ……

**SIGNATURES/VERIFICATION**

…….. ……...

**Parent/Guardian Signature** **Pool Staff Signature**

**The information on this form is collected under the Municipal Freedom Of Information and Protection of Privacy Act and is not released to the public.**