

SWIM LESSON CANCELLATION FORM

This form must be completed at least 30 days prior to your final day of classes. You may complete the form and submit it digitally, or may fill out a paper form in our swim office. We appreciate your patronage and thank you for being a part of our Amber Waves Family!

Required

1. Parent/Guardian Name (First and Last)

2. Student Name(s)

3. Email Address

4. On which days does your class take place?

Monday/Wednesday

Tuesday/Thursday

Other

5. At what time does your class take place?

6. How satisfied were you in the quality of our swim program overall?

7. Please use the space below for additional comments, questions, or concerns.