

# **NASHOBA VALLEY SWIM CLUB**

## **Lesson Registration**

**Nashoba Valley Swim Club  
PO Box 309, Powers Road  
Westford, MA 01886  
Tel: (978) 692-3033**

Complete registration form and forward with payment to the above address. **PLEASE PRINT CLEARLY.**

Parent's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Town: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: (    ) \_\_\_\_\_

Child's Name: \_\_\_\_\_  
Age: \_\_\_\_\_

### **Choose Your Class:**

Session: 1      2      Lifeguarding

Time:      10:45 a.m.    1 p.m.

Your child's level will be determined by our staff on the first day of class. Please inform us of the last level your child completed \_\_\_\_\_.

You are a:

Member      Non Member

Office use only:

Amount Enclosed: \$		
	C	B

Make Checks Payable to:  
Nashoba Hill Corp.