

Private Swim Lesson Request Form



Date Request Received: _____

Instructor: Male/Female/No Preference/Specific Person: _____

Available Dates: From _____ to _____

Preferred Days: (circle all that apply)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Number of Days per Week: _____

Student's Name: _____

Student's Age: _____

Brief Description of Swimming Ability:

Parent/Guardian Name & Phone Number: _____

Instructor Use Only:

Booked Date & Time of Lesson: _____

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