Sherman Swim School Diving Lesson Request Form 2025

1	_	Gender	Date of Birth	Diving Level
	Diving Student Name(s)	(M/F)	(mo/day/yr)	(chart at right)
1				
	Parent Name(s):			
	Address:			
	City:		State:	Zip:
	Best cell # to call with lesson information	1:		
	Secondary cell #:			
	Parent's Email Address:			

www.shermanswim.com Phone: (925) 283-2100

DIVING LEVELS

Dive 1:	Beginning Diver: Has had no formal instruction.		
	(Prerequisite: Be able to dive head-first from diving board.)		
Dive 2:	Has had some diving instruction. Can do forward & back		
	jumps, plus a few dives.		
Div Team:	Once a diver has safe fundamentals and control, plus a few		
	different dives, he/she can compete in meets with the Junior		
	team. Will be invited to join diving team when ready.		

Γ	SEE PAGE 2 FOR DATES, HOURS & PRICES				
					CLASS TIME
	STUDENT NAME(S):	SESSION #:	DAYS M,W &/or F:	DIVING LESSON	5:30 M&W, 2:30 F's
				60 Min Grp Diving	
				60 Min Grp Diving	
				60 Min Grp Diving	
2				60 Min Grp Diving	

PAYMENTS DUE AT BEGINNING OF EACH SESSION

ANNUAL AAU		
PRACTICE INS.	SESSION PRICE	
(\$30/student)	(from page 2)	TOTAL

Special Instructions:

Page 1

2025 PAYMENT & RELEASES **DIVING LESSONS**

INSTRUCTIONS

Complete both sides of this form, sections 1-5, then return by mail or in person to:

Sherman Swim School				
1075 Carol Lane				
Lafayette, CA 94549				

Choose one of the payment options below:

4 PAYMENT N	PAYMENT METHOD				
<u>** PAYMENTS DUE AT THE BEGINNING</u>	** PAYMENTS DUE AT THE BEGINNING OF EACH SESSION. **				
Check payable to Sherman Swim Scl	Check payable to Sherman Swim School or Sherman Divers				
Uenmo @Shermanswimschool	Venmo @Shermanswimschool				
[NOTE: \$25 Administrative Fee for all returned checks.]					
AGREEMENT FOR PARENTAL SUPERVISION & RELEASE OF LIABILITY					
Participants Name(s)	Date(s) of Birth				

The undersigned is either personally taking or has children enrolled to take diving lessons at Sherman Swim School.

I hereby agree that I shall use extreme caution and will be present to actively supervise my children at all times while on the premises of Sherman Swim School. In consideration of accepting me or my child's entry into a diving program, a program that I accept as having inherent risks, I hereby, for myself or my child, waive and release all rights and claims for damages I or my child may incur against Steve Sherman. Laura Sherman, their employees, representatives and/or successors for any and all injuries suffered by myself or my child at any activity sponsored by Sherman Swim School.

I consent to the use for advertising purposes of any and all photographs and/or videos taken of my child(ren) at Sherman Swim School, waiving any right to inspect or approve such photographs or videos before their use, and waiving any and all rights to compensation for their use in Sherman Swim School's advertising.

By signing this document, I agree that I have read and fully understand its contents. I am aware that this is a release of liability and a contract between myself & Steve Sherman, Laura Sherman, their employees and affiliated organizations. I am signing this document of my own free will.

Parent/Guardian Signature: Date: ____

Date

Print Name: ______ Relation to Student:

Signature