



Robert and Dorothy Ludwig  
Schenectady Jewish Community Center  
2565 Balltown Road Niskayuna, NY 12309  
(518) 377-8803 [www.schenectadyjcc.org](http://www.schenectadyjcc.org)

## REGISTRATION FORM FOR AQUATICS

Date of Registration: \_\_\_\_\_

First & Last Name of Participant: \_\_\_\_\_

First & Last Name of Parent (if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_ Contact Name: \_\_\_\_\_

PLEASE CIRCLE: Limited/Complete Member OR  
Non-Member OR SilverSneakers® Participant

### PLEASE CIRCLE NAME OF CLASS:

Parent and Child Pre-School Level 1 Level 2 Level 3 Level 4  
Level 5 Level 6 Aqua Fitness Evening Aqua Fitness Private Lessons

Please Circle Day(s) of Class: Mon. Tues. Wed. Thurs. Fri. Sun.

Time of Class: \_\_\_\_\_ AM/PM

Price of Class (\$): \_\_\_\_\_

Signature: \_\_\_\_\_

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#### Office Use Only:

Paid in Full: \_\_\_\_\_ Partial Payment: \_\_\_\_\_ Balance: \_\_\_\_\_  
Cash: \_\_\_\_\_ Check: \_\_\_\_\_ Credit Card: \_\_\_\_\_ Revised 4/12/2012