

REQUEST FOR MAKE-UP OF A MISSED CLASS

If any way possible, come to the scheduled class for the child's sake. Skills are presented in a sequence suited best for learning. Swim lessons should be a priority. We cannot guarantee that a make-up class will be available.

STUDENT'S NAME _____ REQUESTOR'S NAME _____

PHONE NUMBER (H) _____ (WK) _____ (CELL) _____

TODAY'S DATE _____ DATE OF ABSENCE _____ CLASS LEVEL _____

1. DATE AND TIME YOU NOTIFIED ADVENTURE SWIM SCHOOL OF MISSED CLASS: (check one)

- AT REGISTRATION AT LEAST 48 HOURS IN ADVANCE ONE DAY IN ADVANCE
 DAY OF CLASS NO PRIOR NOTIFICATION

2. REASON FOR MISSING CLASS [REQUIRED]: (check one)

- ILLNESS with Dr.'s NOTE ILLNESS (No Dr. Note) OTHER SPORTS PARTICIPATION
 GUESTS IN TOWN OUT OF TOWN FORGOT OTHER _____

3. WHEN ARE YOU AVAILABLE FOR MAKE-UPS?

(please check all that apply – the more you check the better the chances)

MONDAY	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> evening	THURSDAY	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> evening
TUESDAY	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> evening	FRIDAY	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> evening
WEDNESDAY	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> evening	SATURDAY	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> evening

Priority in Make-Ups are given in the following order:

A. Notification at registration B. Illness- with Dr's Note C. 48 Hrs. Notification - illness - no Dr note D. Schedule Conflict E. No Notification

NOTE: We cannot promise that make-up classes will be available. We will try hard to find a make-up class for you.