



# City of Hialeah Gardens

Parks & Recreation Department

Swimming Program Registration Form

13501 N.W. 107<sup>th</sup> Avenue, Hialeah Gardens, FL 33016

Phone (305) 558-2331 Fax (305) 558-4958

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## SWIMMING PROGRAM

Date: \_\_\_\_\_

Students Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Name of Parent: \_\_\_\_\_

Telephone Home: ( ) \_\_\_\_\_ Cellular: ( ) \_\_\_\_\_

Name of Child's Physician:  
\_\_\_\_\_

Physician's Telephone: ( ) \_\_\_\_\_

Hospital of Preference:  
\_\_\_\_\_

Health Insurance: \_\_\_\_\_

Allergies or Illness:  
\_\_\_\_\_

### **Emergency Contact Information:**

Name: \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_