



# GHYMCA SWIM SCHOOL 2021 EFT Registration & Change Form

Branch \_\_\_\_\_

**A. Participant Name:** \_\_\_\_\_  
(first) (MI) (last)

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

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Preferred Phone: \_\_\_\_\_

**Swim School Enrollment Process**

- 1) Complete and submit this form by drop off, fax, or email to Aquatic Coordinator
- 2) Register in person or online for your class

If you receive a YMCA scholarship, this will be reflected in your monthly payment. Please use one form per participant.

Monthly Swim School payments are drafted monthly until changed in writing.

Any adjustments to program rates will be provided in writing with at least 30 days advanced notice.

**B. REGISTER NEW PARTICIPANT (1 swimmer per form)**

I am registering for:

<b>PRESCHOOL</b>	<b>YOUTH</b>
<input type="checkbox"/> Parent Child (Stage A-B)	<input type="checkbox"/> Stage 1 Water Acclimation
<input type="checkbox"/> Stage 1 Water Acclimation	<input type="checkbox"/> Stage 2 Water Movement
<input type="checkbox"/> Stage 2 Water Movement	<input type="checkbox"/> Stage 3 Water Stamina
<input type="checkbox"/> Stage 3 Water Stamina	<input type="checkbox"/> Stage 4 Stroke Introduction
<input type="checkbox"/> Stage 4 Stroke Introduction	<input type="checkbox"/> Stage 5 Stroke Development
	<input type="checkbox"/> Stage Stroke Mechanics

<b>ADULT</b>	<b>AQUA BUDDIES</b>
<input type="checkbox"/> Parent Child (Stage A-B)	<input type="checkbox"/> Parent Child (Stage A-B)

**CHANGE STAGE (per Aquatic Coordinator recommendation)**

I will be moving:

FROM STAGE: \_\_\_\_\_ TO STAGE: \_\_\_\_\_

REASON FOR STAGE CHANGE: \_\_\_\_\_

**HOLD OR CANCEL (30 days written notice required)**

Please change the status of my swimmer's enrollment to:

Cancel  Hold

My swimmer's last day will be: \_\_\_\_\_

Reason for cancel/hold: \_\_\_\_\_

**Note: Membership holds and cancellations require a membership change form.**

**C. PLEASE INDICATE YOUR PREFERRED DAY & TIME**

Choice 1: \_\_\_\_\_

Choice 2: \_\_\_\_\_

**D. Notice to Electronic Funds Transfer (EFT) Pay Members**

It is my complete understanding that if I wish to terminate my child's enrollment, I must give the YMCA thirty (30) days written notice prior to my swimmer's withdrawal date. I understand that I will be notified at least 30 days in advance of any changes to my monthly payments. I understand that the monthly debit to my account is a continual draft until the YMCA receives thirty (30) days written notice of cancellation. Should any pre-authorized check/charge (EFT) not be honored by my financial institution, it is understood that the payment is to be made by me in the amount of said payment, and I realize that I am responsible for that payment, plus a service charge. **This service charge does not include possible fees imposed by my financial institution.** I understand that if two EFT payments are rejected, my swimmer's enrollment will be terminated.

I, \_\_\_\_\_, read, understand and agree to the statement above.

first & last name

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

**E. CREDIT CARD/DEBIT CARD**

TYPE  VISA  MASTERCARD  AMEX  DISCOVER

Name on Card \_\_\_\_\_ Card Number XXXX-XXXX-XXXX-\_\_\_\_\_ provide the last 4 digits

EFT  
 Financial Institution \_\_\_\_\_ Name on Account \_\_\_\_\_

Routing Number \_\_\_\_\_ Last 4 Digits of Account Number \_\_\_\_\_

**Note: if this billing information is not currently on file with us, please stop at the Welcome Center to store this information in your electronic wallet.**

Authorized Signature of Account Holder \_\_\_\_\_ Date \_\_\_\_\_

TO BE PROCESSED BY BACK OFFICE - PLACE COMPLETED FORM IN AQUATIC COORDINATOR'S MAILBOX