



**Swim Lesson Contract
Aspen Hill Club**

14501 Homecrest Road, Silver Spring, MD 20906
(301) 598-5200 Fax (301) 598-4110

CODE: 460

Date: _____

Effective: Jan. 1, 2011

Instructor Name: _____ Client Name: _____

Phone Number: _____ Member Account Number # _____

PACKAGE INFORMATION: Length, and Cost:

Private	1-½ hr _____ \$25	1-45 min _____ \$37	1-1 hr _____ \$50	1-90 min _____ \$75
Semi-Private (cost is per student)	1-½ hr _____ \$18	1-45 min _____ \$27	1-1 hr _____ \$36	1-90 min _____ \$54

Comments: _____

Method of Payment: Check # _____ Club Account _____

I, _____ agree to purchase private swim lessons for a total of \$ _____. I understand there is a 24-hr cancellation policy. Failure to cancel a scheduled session without a 24-hr notice will result in loss of that session. I also understand that no refunds will be given.

Client Signature: _____

Date: _____

Instructor Signature: _____

Date: _____

Session #	Date	Client's Initials	Chit #	Comments – Paid-Cashier's Initials
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

