

LA Swim School Suspension Form

(Please Print)

Parents Name: _____

Student Name/s: _____

SSID/s: _____

Reason: _____

I request that my Learn to swim classes to be suspended for the following dates (Maximum of 4 lessons in a year)

Date of lesson absent: _ / _ / _

Date of lesson absent: _ / _ / _

Date of lesson absent: _ / _ / _

Date of lesson absent: _ / _ / _

Total of suspended lesson: _____

Signature: _____

Date: _ / _ / _

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