

SPRING 2025 SNOEZELEN SWIM

REGISTRATION FORM

Client's First Name	Last Name
Client's Date of Birth	,
Primary Caregiver's First Name	Last Name
Attending Caregiver's First Nar	ne Last Name
Email Address	Dhono Numbor
Email Address	Phone Number
Are you a Holland Bloorview Cl	ient? 🗌 Yes
Re	egistration Day/Time
Saturdays Children and Youth Re Victoria Day weekend)	elaxation Swim 11:15am - 12:00p.m (* no sessions Easter and
☐ ALL 7 sessions	☐ May 24
☐ April 12	☐ May 31
☐ April 26	☐ June 7
☐ May 3	
☐ May 10	
Saturdays Children and Youth Co and Victoria Day weekend)	ombination Swim 12:15p.m - 12:45p.m (* no sessions Easter
☐ ALL 7 sessions	☐ May 24
☐ April 12	☐ May 31
☐ April 26	☐ June 7
☐ May 3	
☐ May 10	

Wednesdays Adult Relaxation Swim 1:00 – 1:45 p.m.		
☐ ALL 8 sessions	☐ May 14	
☐ April 16	☐ May 21	
☐ April 23	☐ May 28	
☐ April 30	☐ June 4	
☐ May 7		
Wednesdays Adult Combination Swim 2: 00 – 2:45 p.m.		
☐ ALL 8 sessions	☐ May 14	
☐ April 16	☐ May 21	
☐ April 23	☐ May 28	
☐ April 30	☐ June 4	
☐ May 7		
Private Family/ Group Session (Able to request sessions noted above for private booking, please contact for details) *** When in program, please inform staff of any medical information that may be of importance for the client(s) safety during the session(s)		
CREDIT CARD PAYMENT INFORMATION (Can provide details via phone)		
Type of card:		
Name on Card:		
Credit Card Number:		
Expiration Date (mm/yr):		
Disclaimer		
All classes are subject to cancellation if registration is insufficient. A minimum of 3 registered swimmers are		
needed to run each session. You would be notified of this event and no charge would apply.		

Method of form submission, email to: snoezelen@hollandbloorview.ca

All sessions need to be **pre-paid** before confirmation. Registrations will be processed in the order received.