Pullman Aquatic & Fitness Center

Private Lesson Questionnaire

All patrons requesting Private Lessons MUST complete this form before enrolling. This questionnaire will help us identify your needs and match you with the best instructor for you or your child. Please fill out as completely as possible.

Date of Application: _____

Student Name: _____ **Date of Birth:** _____ **Age:** _____

Parent Name (If applicable): _____

Address: _____ **City:** _____ **Zip:** _____

Home Phone: _____ **Alternative Phone:** _____

Email: (optional) _____

1. How many students are you interested in private lessons for? (Please fill out a questionnaire for each.)
❑ One ❑ Two ❑ Three ❑ Four or more

2. How many lessons would you like? (30 minutes or 45 minutes)
❑ One ❑ 2-6 ❑ 7-10 ❑ 10 or more ❑Unknown

3. What day(s) of the week are you available for lessons?
❑ Monday ❑ Tuesday ❑ Wednesday ❑ Thursday ❑ Friday ❑Saturday ❑Sunday

4. What time(s) are you available for lessons?
❑ 7–9am ❑ 9-11am ❑ 11am-1pm ❑ 1pm-3pm ❑ 3-5pm ❑ 5-7pm ❑ 7-9pm

5. Do you have a specific instructor in mind? If yes, please write name below and stop filling out this questionnaire. If no please continue: _____

6. What level is the student? ❑ Tadpole ❑ Turtle ❑ Frog ❑ Gator ❑ Seahorse
❑ Trout ❑ Salmon/Swordfish ❑ Dolphin ❑ Adult ❑ Do not know

7. Instructor Characteristics (we will do our best to accommodate)

a. Sex: ❑ Male ❑ Female ❑ No Preference

b. Age: ❑ 16-22 ❑ 23-30 ❑ 31+ ❑ No Preference

c. Teaching Style: (you may choose more than one or add your own):
❑ Mellow ❑ Playful ❑ Assertive ❑ Direct ❑ Quiet ❑ Loud

8. What are you hoping to achieve from Private Lessons? _____

_____

9. Any other information about the student that would help our instructor teach to the student's needs. (learning styles, personality traits, special needs, physical limitations, etc.) _____

_____

Making Family Fitness FUN!

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