



# Learn to Swim: Enrolment Form

narooma@communityaquatics.com.au

Ph: 4476 2398

www.eurobodallaaquatics.com.au

## Personal Information

Child's Surname

First Child

Date of Birth / /  Male  Female

Second Child

Date of Birth / /  Male  Female

Third Child

Date of Birth / /  Male  Female

Conditions & Special Considerations \_\_\_\_\_

## Contact Information

Parent/Guardian

Contact Numbers Home  Mobile

Address

Suburb  Postcode

Email

Cost \$14.50 per lesson (All Payments Upfront @ First Lesson)

Preferred Time	_____ (Between 2pm and 5.30pm)	<b>WEEKDAYS</b>
Program	<input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri	
Preferred Time	_____ (Between 8.30 and 12.30pm)	<b>SATURDAYS</b>
Program	<input type="checkbox"/> Saturday	

*By signing this enrolment form I am agreeing to the First Splashes Learn to Swim Program Terms and Conditions.*

*All Eurobodalla Swimming Centre proudly deliver the First Splashes Learn To Swim Program. A program endorsed by both AUSTRALIAN SWIMMING and SWIM AUSTRALIA*

Parent / Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_

### Office Use Only

Accepted by (staff name): \_\_\_\_\_ Date: \_\_\_\_\_

Added to Links (staff name): \_\_\_\_\_ Date: \_\_\_\_\_

Confirmed Lesson: Day: \_\_\_\_\_ Time: \_\_\_\_\_ Program: \_\_\_\_\_

Payment: Cash / EFT Amount Paid at Booking: \$ \_\_\_\_\_ Links Client # \_\_\_\_\_