

REQUEST FOR SWIM TIMES FORM

Welcome to our swim school! Please complete the following form for each of your children and then submit it to Administration office for the Swim School at your earliest convenience. Note that a combination of factors is considered when allocating swim times, namely:

- a) Your child's swimming ability
- b) Your swim time request, and
- c) Current availability during your 'requested' time.

Surname _____

Child's First Name _____ Birthdate _____

Mom's Name _____ Dad's Name _____

Physical Address _____

Postal Address _____

Tel. No.: (H) _____ (W) _____

Cell No.:(1) _____ Email _____

Are you interested in lessons:

Once a week? Twice a week? Private?

Please add any further enquiries into the box below:

