



Application Form

Child's first name:.....Surname:.....

Date of birth:..... Boy:_____ Girl:_____ (please tick)

Address:.....

.....Postcode:.....

Name of Parents(s)/Guardian(s):.....

Home Tel No:.....Mobile:.....

Email:.....

Has your child been in a swimming pool: Yes:_____ No:_____

Can your child swim: Yes:_____ No:_____

Has your child had tuition before: Yes:_____ No:_____

What swimming awards have they done?.....

Where did they previously swim club/venue:.....

.....

Does your child have any medical conditions: Yes:_____ No:_____

If you have answered yes to the above question please specify.....

.....

How did you hear about us?

.....

Amount due this term: £_____ for _____ lessons

Plus family registration fee: £20 (new members only) incl. One free swim hat £5

Payments can be made via Splish Splash Swim School

bank transfer 09-06-66 Acc: 43703772 Ref: Child's Surname

Thank you for choosing Splish Splash Swim School.

I confirm that I have read and agree to all the guidelines and rules.
Any breach of these rules will result in immediate expulsion from
Splish Splash Swim School.

Print..... Sign.....

Date

Call or email Tony and Anita directly:

Mobile 07765258438/07745587506

www.splish.splashswimschool.co.uk

splish.splash@hotmail.co.uk