



## ENROLMENT FORM

<b>TERM LESSONS</b>	<input style="width: 50px;" type="text"/>	<b>HOLIDAY LESSONS</b>	<input style="width: 50px;" type="text"/>
<b>PERSONAL INFORMATION</b>			
		Date:	
Surname: (parents/caregiver)			
First name: (parents / caregiver)			
Middle name: (parents/caregiver)			
Date of birth:		Gender:	M / F
Address in full (e.g. rapid no#/road name/RD no#)			
Post code:		E-mail:	
Phone: (0 )		Mobile:	
Child 1 - full name:		Date of birth:	M / F
Child 2 - full name:		Date of birth:	M / F
Child 3 - full name:		Date of birth:	M / F
Child 4 - full name:		Date of birth:	M / F
Medical Conditions:			
Preferred day:		Times available for lessons	
Monday	<input type="checkbox"/>		
Tuesday	<input type="checkbox"/>		
Wednesday	<input type="checkbox"/>		
Thursday	<input type="checkbox"/>		
Friday	<input type="checkbox"/>		
Saturday	<input type="checkbox"/>		



*Every child should be able to swim 200m competently by the age of 12*

