



P.O. Box 8734, Armadale VIC 3143 :: **Mobile** +61 419 005 183
enrol@swimmingwithexcellence.com :: www.swimmingwithexcellence.com

Enrolment Form – Adults – Term 2, 2021

At Bialik College Gringlas Sports Centre, 21 Cato Street, Hawthorn East, 3123

Term Dates: **Monday 19 April to Sunday 27 June**

**** No Swimming: Sunday 25 April (ANZAC Day), Monday 14 June (Queen's Birthday),
Sunday 20 June (SWE Stars Encouragement Meet)**

Swimmer's First Name: _____ **Last Name:** _____

DOB: _____ **Age:** _____

Address: _____

Suburb: _____ **Postcode:** _____

Telephone: _____ **Mobile:** _____

Email: _____

Does the participant have any medical conditions which may affect their participation in their lesson? e.g. asthma, epilepsy, diabetes, allergies, learning, physical, other:
_____ Yes / No (please circle)

Medication carried by participant: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Learn to Swim Level: (all enrolments are subject to assessment)

Beginner / Intermediate / Advanced Level known: _____

Preferred Day: (please circle) **Monday** (6.00pm) **Saturday** (11.15am)

Each session is 45 minutes during school term.

Adult Squad: (attend up to 3 sessions per week during school term)

Squad times available: (please circle)

Monday 6.00-7.00pm, **Tuesday** 6.00am-7.30am, **Wednesday** 6.30pm-7.30pm, **Thursday**
6.00-7.30am



Safety



Customer Satisfaction



Quality Programs



Professional Instructors



Passionate & Caring



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Adult Term fees:

| | | |
|--|---------------------------|-------|
| Learn to Swim -(attend 1 lesson per week) | - Monday (9 week term) | \$252 |
| | - Saturday (10 week term) | \$280 |
| Squad -(attend up to 3 sessions per week) | | \$250 |

Payment must be made at time of enrolment to secure your class.

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Payment options:

Direct into the Swimming with Excellence bank account:
National Australia Bank, BSB: 083 231 A/c: 94 145 1698
(Name of participant to be included in Description/Remitter information).

Credit Card payment can be taken over the phone once enrolment form has been received. **Please note that all card payments incur a 1.3% surcharge (AMEX 1.5%).**

Credit Card: Visa / MasterCard / Amex
Number: _____ / _____ / _____ / _____
Expiry: _____ / _____
Amount: _____ + Fee: _____ = Total: _____
Name on card: _____
Signature: _____

I / we confirm we have read and understood the terms and conditions detailed on the Swimming with Excellence website: www.swimmingwithexcellence.com

If you prefer to opt out of our photo & video consent policy, please check the box below:
 I do not consent to be photographed, videotaped and/or audio taped during Swimming with Excellence classes and events.

Signature: _____ Date: _____
Print Name: _____

