

School Swimming Program Enrolment Form

Child's name: _____

Parent name _____

Parent Contact _____



School year in 2023 (please circle):

1

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DOB: _____ Gender (please circle): M F

Please note: All medical information given to the Aqualife Swim School will be confidential and only used in the interest of safety or teaching standards.

Is your child subject to any medical conditions that may affect their safety, swimming ability or require special assistance? (Please circle) Y N

If yes, please specify:

What stage is your child currently in?

Is your child currently completing, or has previously completed, lessons with Aqualife Swim School (please circle): Y N

If yes, please specify where your child currently swims and what stage:

Is your child currently completing lessons with another swim school (please circle) Y N

If yes, please specify where your child currently swims and what stage:

If your child is not currently taking lessons, or you are unsure as to what stage they are, they will be assessed into the correct level on the first lesson of the program based on Aqualife Swim School staff's assessing standards.

Permission Form Please sign and return this form to St Pius X by **Friday 9/12/2022**

I give permission for my child _____ to attend swimming lessons at Aqualife from 13 - 24 February 2023. If the centre is unable to contact me, I authorise St Pius X staff to consent to my child receiving medical treatment if necessary.

Signature: _____ **Date:** _____