



## Central Swim School Enrolment Form – Adult

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Male  Female

Postal Address: \_\_\_\_\_

Town: \_\_\_\_\_ Post Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

### **Emergency Contact Person Information:**

Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Do you have any medical conditions or an allergy** Y  N

(please detail so we can beware of your needs):

\_\_\_\_\_  
\_\_\_\_\_

Preferred Day: Monday  Tuesday  Wednesday  Thursday  Friday  Saturday   
(Please Tick)

Where: (Please Tick) Cromwell Pool  Alexandra Pool

**Note:** Due to high demand, Central Otago Swim School does not accept tentative bookings. Once a booking is made, it must be paid for before this booking is treated as confirmed. Fees for our swim programmes during the year are to be paid in advance by direct credit at the pool facility or fortnightly direct debit, or via cash/EFTPOS before lessons commence.

Do we have permission to use digital images for the purpose of advertising or promotional material?

Yes  No

For more information or queries please contact 03440 0680 or 021 490 264 or email to [centralswimschool@cdc.govt.nz](mailto:centralswimschool@cdc.govt.nz)

**I have read the terms and conditions**

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ /20\_\_\_\_

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Staff to complete: Envibe Swim School number: \_\_\_\_\_ Date Swim School Class Fees paid \_\_\_\_ / \_\_\_\_ /20\_\_\_\_

Sold by Staff (Name): \_\_\_\_\_ What was Purchased: \_\_\_\_\_

Payment Type: EFTPOS, Cash, Direct Debit, Credit Card (Please circle one).

Information added in Envibe by: \_\_\_\_\_ Update of information only Yes  No