Swimmer Application Form (Adult)



Print sign & return via: Scan & Email:

<u>lucy@greydogs.co.za</u>
Or hand in at the reception at Waterstone

* Please complete in block letters

I am interested in (circle):	Stroke Correction and Fitz	ness Sessions	Private Sessions
Name and surname:		DOB:	DD/MM/YYYY
Cell number:		Work nr:	
Email address:		Home nr (landline):	
Email address (alt):			
Please describe your swimming	ence, participation in competition g goals and your interest in havir	ng lessons: (eg learn	to swim and be water safe, general
If you are interested in Private	sessions, please indicate what ti	me would be suit you	:
1st option:	2nd option:	3rd	d option:
official (qualified or unqualifichild(ren) resulting from my/or in which my child(ren) pawhether or not such injuriewhatsoever. I acknowledge tas the legal guardian/paren	ed), in respect of any injuries a their participation in training s rticipate in as members of the s or damages arose as a re hat this waiver has been mad t of my minor child(ren) and	sustained or damagessions or events of e Greydogs Swimmesult of negligence by me voluntarily that it is unconditio	arlow, or any coach, assistant or ges incurred by me or by my minor organised by Greydogs Swimming ning Team or Club, irrespective of e, injury, theft or from any cause in my personal capacity / capacity nal. I agree to abide by the rules Barlow whom I indemnify against
Name		(block lette	ers)
Signed:		Date:	