

October 2021 Holiday Splash Enrolment Information

Surname	e:				Parent/Guardian Name:														
Address	:				Postcode:														
Mobile No:								Ema	ail										
Emerger	ncy Con		Phone																
Swimme	er 1																		
Name:					DOB:						_ Level:								
Swimm	er 2																		
Name:					DOB:					Level:									
Swimme	er 3																		
Name:					DOB:					_ Level:									
														- (
Holiday Splash 1 Holiday Splash 2										1			Lim	e Pref	erence	<u> </u>			
					28th September – 1st October														
					(4 Days) 4 th – 8 th October														
					(5 Days)														
Terms aı	nd Conc	litions	<u>S</u>																
I have re	ead and	accep	ot th	e Hale	e Swim	Scho	ol Teri	ns and	d Cond	itions	and th	ne Swir	n Safe	Medi	cal Info	ormati	on.		
Signed _	iignedDate																		
Payment	t Details	<u> </u>																	
Hale Sch						•				•							•	lies)	
Paymen	t Metho	od: Ha	ale S	wim s	School	, BSB:	086 4	92, AC	CC No.	560 94	48 107								
Visa MC EXF					PIRY					AMOUNT \$									
				-					-					-					