

Swimming Lessons/Fun Camp Booking Form 2018

(Please use one form per swimmer)

Choose Lessons/Camps (Please tick):

Fun Swim Camp	Intensive Swim Lessons	Irish Water Safety	Little Swimmers	Private Lessons
3 day swim camp €30	5 day session €50	5 day swimming & lifesaving session €45	5 day learn to swim session for U6's €50	Child & Adult swim lessons €30/session (max 3 swimmers per session)
<input type="checkbox"/> 3 rd - 5 th July	<input type="checkbox"/> 16 th - 20 th July	<input type="checkbox"/> 23 rd - 27 th July	<input type="checkbox"/> 9 th - 13 th July	<input type="checkbox"/> _____ Date Requested
<input type="checkbox"/> 21 st - 23 rd Aug	<input type="checkbox"/> 30 th July - 3 rd Aug	<input type="checkbox"/> 13 th - 17 th Aug	<input type="checkbox"/> 10:30 - 11:10 am <input type="checkbox"/> 11:30 - 12:10 pm	
	<input type="checkbox"/> 6 th - 10 th Aug		Parent & Child lessons also available	
	<input type="checkbox"/> 10:00 - 10:50 am <input type="checkbox"/> 11:00 - 11:50 am <input type="checkbox"/> 12:00 - 12:50 pm <input type="checkbox"/> TINY TOTS (12:00 - 12:40)			Inquire at reception or email: ctownswim@gmail.com

**Season Ticket holders receive 10% discount off all the above classes.
Payment to be made in full to secure your place on the course.**

Name of Parent/Guardian: _____

Address: _____

Email Address: _____ Contact No(s): _____

Emergency Contact No: _____

Name of Swimmer: _____ Date of Birth: _____

Swimming Ability: Beginner Improver Advanced Notes: _____

Does your child have any medical conditions? Yes / No If Yes, please specify _____

My child and I have read and will abide by the Pool Rules: Please initial _____

Our Privacy Policy details how Personal Data is managed. For IWSA Water Safety Classes, information will be shared with Irish Water Safety to record awards and process certificates. Charlestown Swimming Pool may email or text me about the pool services. Please initial to agree _____

Signature: _____ Date: _____

Total Due: € _____ My Chosen method of Payment: Cash Cheque EFT

Cheques: Please make payable to: Charlestown Swimming Pool Recreational Company Ltd.

EFT: Please include your name in the reference so we know the payment is from you 😊

Account Name: Charlestown Swimming Pool Recreational Co. Limited Bank/Branch: AIB Swinford.

BIC: AIBKIE2D. IBAN: IE68 AIBK 9372 6605 7081 87

Paid

For Office Use: Amount: € _____ Type: CA, CH, EFT Received by: _____ Date: _____