

Parent / Guardian details					
Full name					
Date of birth					
Address					
	proof of address with your submission. confirm that you have included this document.				
Phone number					
Email address					
Gender					
_	u identify as Aboriginal or Torres Strait Islander: Yes No				
Country of birth					
Years residing in Australia					
Languages spoken at home					
	proof of place of birth, such as a passport, visa, or birth certificate. confirm that this document is included with your submission.				
Does the parent/gua	ardian have any additional needs we should be aware of?				
If yes, please provide details:					
Emergency					
contact name					
Emergency contact number					





		Child details		
Full name				
Date of birth				
Gender				
Please indica	te if yo	u identify as Aboriginal or Torres Strait Islander:	Yes	No
Country of b	irth			
Years residir Australia	ng in			
Languages spoken at ho	ome			
Tick the	e box to partici _l	proof of place of birth, such as a passport, visa, or birt confirm that this document is included with your subn pated in formal swimming lessons before?		e. No
If yes, please	provid	e details:		
Where				
When				
How often				
Does the child		any additional needs we should be aware of? e details:	Yes	No







Program enrolment details

Ple	ase tick the items you are enrolling for:				
	Heart Beat Club training by Royal Life Saving WA (2-3-hour training) - o	optional			
Ple	Please indicate if you are available to attend the dates listed on the website: Yes No				
If n	If no, please let us know your preferred day and time:				
	Water Safety Awareness training facilitated by Royal Life Saving WA (1-hour training) – compulsory o (must be completed before swimming lessons commence)				
Ple	ase indicate if you are available to attend the dates listed on the website:	Yes	No		
If n	o, please let us know your preferred day and time:				
	10 lessons of swimming for the child accompanied by parent/guardian – compulsory				

Availability for swimming lessons

Please mark when you're available to come to swimming classes

	Monday	Tuesday	Wednesday	Thursday	Friday
AM					

Creche

Creche will be available during swimming lessons, Water Safety Training and Heart Beat Club training.

Please indicate if creche will be required:

Water Safety Awareness training facilitated by Royal Life Saving WA (1-hour
training)

10	lessons	of swim	mina fo	r the	child	accompanied	hy narent	lauardian
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☐ Heart Beat Club training by Royal Life Saving WA (2-3-hour training)







Payment and confirmation

The cost for each participant is \$42.50 (ex GST).

Payment details:

- Includes access to Heart Beat Club Training, Water Safety Awareness training and 10-weeks of parent and child water based sessions
- The City will cover 75% of the total cost (\$127.50)
- Payment instructions will be provided upon enrolment.
- □ I confirm that I understand and agree to the payment of \$42.50 per participant for the selected program components.

Declaration

I,, declare that the information provi enrolment form is true and accurate to the best of my knowledge.	ded in this
I consent to the participation of my child,	
 I have read and agree to the Terms and Conditions for attending the Leisure World. 	City of Gosnells
Parent/Guardian Signature:	

