

**NCHS - SWIMMING LESSON
MEMBERSHIP APPLICATION FORM**

NCHS – Community Leisure, Gallowstree Lane, Newcastle Under Lyme ST5 2QS
01782 667 658

Child Full Name:

Address:

Postcode:

Contact in case of emergency

Name:

Address:

Tel No:

Relationship:

Date of Birth:

Gender:

Male / Female

In order to keep in touch with parents regarding changes to timetable, other activities and enrollment please print your email address

Email:

Are there any medical conditions/disabilities/special needs which the club should be aware of e.g. allergies, epilepsy, diabetes, asthma:

Any regular medication:

Please insert current Swimming level, (eg non swimmer, Goldfish 1, 50m badge, lifesaver)

Signed

Date

Signed by Coach

Date

Internal Use