



Cnr Nestad and Witbank Avenue
Sundra, 2200
Delmas,
South Africa
076-788-7638

SWIMMING LESSONS

Swimmers learn at their own pace through fun methods. Progress is largely dependent on their concentration, coordination, how regularly they attend lessons and how often they are exposed to swimming outside of the swim school. We do not teach hands off methods as swimmers often need hands on help to master techniques.

Indemnity/enrolment forms must be completed and signed before lessons can commence.

A registration fee of R550 is payable once off at the start of the swimming season, this includes the following; Swimming Cap, water bottle, backpack, swimming towel, t-shirt. Please note this fee is non-refundable.

A swimming costume, preferably a one piece (**No Ballet leotards**), towel, and swimming cap is required at every swim lesson.

Huggies Little Swimmer nappy is to be worn if your child is not yet potty trained.

Swimming fees are payable monthly in advance by the 5th of every month. Payments are to be made by **EFT ONLY** unless discussed with management.

Please send Proof of Payment to sales@funtazia.c.za or 0767887638

Full fees are payable for all months including December and January.

Fees are payable for the winter months of June, July, August this is per lesson by appointment.

BANKING DETAILS

FUNTAZIA
SSK-LISA MEYER
FIRST NATIONAL BANK
BUSINESS CHEQUE
62630812247
250655
Reference# SUPER SWIMKIDZ Child's Name

LESSONS AND GENERAL INFORMATION

There are no lessons on Public Holidays, should a swimmer not attend lessons due to inclement weather, ill health, vacation or for any other reason, the full fees are still payable and the lessons unfortunately forfeited.

Should the instructor be unable to take a class due to unforeseen circumstances, an arrangement for a qualified substitute will be made to stand in for the lesson or a catch up lesson will be arranged.

There will be an annual fun gala at the end of February/March. Every swimmer is encouraged to take part. No extra fees are required for this gala therefore we ask you to please pay the annual registration fee so that medals can be arranged for each swimmer.

RESIGNATION AND NOTICE

One calendar months' notice is required in writing and the month's fees payable if you wish to discontinue lessons. We regret that no resignations will be accepted in November or May. If you wish to resign in these months, fees will still be payable for the following months of December and June respectively.

CALENDAR FOR SWIMMING YEAR



01 January to 31 May	5months
01 September to 15 December	4months
Easter Weekend	CLOSED
Public Holidays	CLOSED
June, July, August (Winter)	OPEN – WEATHER DEPENDANT WE WILL DO LAND-BASED TRAINING IF WE CAN'T SWIM IN THE HALL OR CLASSROOM
December – January holidays	CLOSED
Registration for the year	ALL YEAR ROUND

FEES AND PAYMENTS SWIMMING LESSONS

1x lesson per week	R350,00 per month
2x lesson per week	R600,00 per month
Discounted year Jan-Dec	10% discount
3 or more siblings	10% discount

CALENDAR FOR WATER AEROBICS

01 January to 15 December	12 months
Easter Weekend	CLOSED
Public Holidays	CLOSED
June, July, August (Winter)	OPEN – WEATHER DEPENDANT
December – January holidays	CLOSED
Registration for the year	No cut off

FEES AND PAYMENTS WATER AEROBICS

1 x lesson per week	R 60,00 per month
4 x lesson per week	R220,00 per month
Discounted year Jan-Dec	10% discount

I,..... have read and agree to the terms and conditions of Super Swim Kidz Swim School

Date.....Signature.....



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Nursery School After care	Baby & Me	Learn to Swim	Water Aerobics	Special Needs	Holiday Care
X	x	X	X	X	X
Date enrolled:	Date enrolled:	Date enrolled:	Date enrolled:	Date enrolled:	Date enrolled:
Instructor:	Instructor:	Instructor:	Instructor:	Instructor:	Instructor:

Participant Surname:

Participant Full Name:

Date of Birth: Year..... Month..... Day.....

I.D Number:

Parent Name:

Parent Surname:

Email address:

Home telephone:

Work telephone:

Cell Number MOM:

Cell Number DAD:

Medical Aid YES/NO :

Plan:

Medical Aid Number:

Does the participant suffer from any (PLEASE SPECIFY?)

Chest ailments YES/NO

Physical Injuries YES/NO

Ear ailments YES/NO

Has the participant had any incidents around the swimming pool YES/NO

Has the participant attended swimming lessons prior to this YES/NO



INDEMNITY

I HEREBY WAIVE ANY CLAIM WHICH I MAY HAVE AGAINST SUPER SWIM KIDZ SWIM SCHOOL OR ANY OF THEIR EMPLOYEES FOR ANY DAMAGE SUSTAINED BY ANY PERSON WHICH MAY ARISE IN CONNECTION WITH SUPER SWIM KIDZ SWIM SCHOOL WHETHER SUCH DAMAGE ARISES AS A RESULT OF THEFT, LOSS OF LIFE, BODILY INJURY OR ANY CAUSE WHATSOEVER.

SIGNATURE: NAME:..... DATE:.....

CHECKLIST

Participant's Copy Birth certificate	
Mom copy of ID	
Dad copy of ID	
ID Photo of Participant	
Signed contract	