



Learn to Swim/Squad Absent Form

PARENT/ GUARDIAN DETAILS:

Full Name Email

Contact Number (H) (W)..... (M).....

Relationship to Student:.....

STUDENT DETAILS:

Full Name: DOB / /

Learn to Swim/ Squads Day/s Time/s.....am/pm.
(Please circle)

Start Date of Absence / /

End Date of Absence / /

Reason for Absence:

Absence Policy

- We require a minimum 2 weeks' notice if you want to put your class/squad position on hold, hold fees as below.
- A maximum absence period of 4 weeks applies.
- All school holiday absences are to be taken as makeup classes.
- If your child is injured or sick with proof, exemption to hold fees can be made on a case-by-case by approval from management with a medical certificate.

The following hold fees apply;

\$12.00 ABSENCE FEE PAID PER GROUP CLASS: YES / NO

\$22.50 ABSENCE FEE PAID PER 15 MIN PRIVATE CLASS: YES / NO

\$30.00 ABSENCE FEE PAID PER PRIVATE CLASS: YES / NO

\$37.50 ABSENCE FEE PAID PER DOUBLE PRIVATE CLASS: YES / NO

SQUAD ABSENCE is 50% of monthly fee YES / NO

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date _____

Office Use:	
Total no. classes missed _____	Charged Account: Yes <input type="checkbox"/> No <input type="checkbox"/> Medical Certificate: Yes <input type="checkbox"/> No <input type="checkbox"/>
Staff Name: _____	Date Processed: _____