



Learn to Swim/Squad Cancellation 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)

Date Notified of Cancellation: / /

Date Cancellation Effective from: / /

Reason for Cancellation:
.....
.....

Cancellation of Learn to Swim & Squad policy

- A minimum of 30 days' notice is required to withdraw your child from Learn to Swim lessons and Squads.
- Please note any makeup classes need to be booked prior to cancellation date.
- Should you not wish to give us 30 days' notice a \$50 cancellation fee will be incurred and position in classes/squads will be forfeited.

\$50.00 CANCELLATION FEE PAID: YES / NO Payable at the time of cancelling

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date _____

Office Use:
Staff Name: _____ Date Processed: _____