



# Christ Church

Website: [www.kirbyswim.com.au](http://www.kirbyswim.com.au)  
Email: [swim@kirbyswim.com.au](mailto:swim@kirbyswim.com.au)  
Address: PO Box: 193, Claremont 6910  
Phone: 9442 1617 Fax: 9442 1683

## Term THREE, 19<sup>TH</sup> JULY – 25<sup>TH</sup> SEPTEMBER 2010

### Enrolment Information

**Surname:** \_\_\_\_\_

Swimmer 1: \_\_\_\_\_ Level: \_\_\_\_\_ Age: \_\_\_\_\_

Swimmer 2: \_\_\_\_\_ Level: \_\_\_\_\_ Age: \_\_\_\_\_

Swimmer 3: \_\_\_\_\_ Level: \_\_\_\_\_ Age: \_\_\_\_\_

**Address:** \_\_\_\_\_

*Street Address*

*Suburb*

*Post Code*

Mobile Phone: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**CURRENT LESSON**  
**DAY/TIME (Term 2, 2010)** \_\_\_\_\_

### Learn to Swim & Mini Marlins

Preference 1 (Term 3, 2010): **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_

Preference 2 (Term 3, 2010): **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_

### Marlins & Red Marlins

(select 2 days to attend)

**Day 1:** \_\_\_\_\_ **Day 2:** \_\_\_\_\_

**Medical conditions:** \_\_\_\_\_

Parent / Guardian Signature \_\_\_\_\_ Parent name \_\_\_\_\_

Kirby Swim will send all information and communication via mail outs, emails and sms.

Please tick box if you wish to **opt out** of receiving any communication from us

### PAYMENT DETAILS – Prices are found on the Kirby Swim CCGS Timetable

**FULL PAYMENT IS REQUIRED WITH YOUR REGISTRATION TO SECURE YOUR PLACE IN OUR PROGRAM.**  
**A 5% DISCOUNT APPLIES TO ALL CHRIST CHURCH GRAMMAR SCHOOL FAMILIES**

CCGS Discount **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

Credit Card #: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiry: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_

### Office Use Only

BOOKED \_\_\_\_\_

INVOICED \_\_\_\_\_  PAYMENT PROC \_\_\_\_\_  CONFIRMATION EMAILED