|  |
| --- |
|  |

 **Believers Church Residential School**

**Swimming Pool Membership/Coaching- Application Form**

**Personal information**

|  |
| --- |
|  Whether coaching is  required  or not Name Male/Female Age  **Yes/No**  Name of spouse Male/Female AgeName of the child Male/Female Age Name of the child Male/Female AgeName of the child Male/Female AgeMailing Address CityState Pin Tel:Tel: Home Mob:**I am** **Registering** Morning Evening**for:** Batch Batch Insurance**Life/personal accident** Company PolicyDate. **Insurance Details** Name No.**Emergency** Contact Person Name Contact No.I ................................................................................. hereby declare that I am willing to join the swimming training/practice. I am willing to send my husband/wife/son/daughter for swimming coaching. By signing below, I attest that I have read, understood and agree to all the terms and conditions of the swimming pool.**Signature**  Name Date |

**Admission Details (office use only)**