

# NOOSA SWIM SQUADS

## REGISTRATION FORM

Please complete & return to Brew or JR at the pool; or scan to [info@noosaswimsquads.com.au](mailto:info@noosaswimsquads.com.au)

STINGRAY	JUNIOR SWORDFISH	INTERMEDIATE SWORDFISH	SENIOR DOLPHIN
2 x 1 hour sessions per week	3 x 60-90 minute sessions per week	3-5 x 90 minute sessions per week	4-10 x two hour sessions per week

<b>Surname:</b>	
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First Name:	Date Of Birth:	Level:	Medical Conditions/Special Requirements:

Contact Details			
<b>Parent/Guardian Name:</b>		<b>Mobile:</b>	
<b>Email:</b>		<b>Suburb:</b>	

All swimmers will require a valid Squad Pass to gain entry to the NAC for each swimming squad session.

Please use your payment receipt from the NAC to claim any SLSC subsidy.