



ADULT - SWIMMING ENROLMENT FORM

This form is to give us an idea of your current ability in the water and what you hope to gain from having swimming lessons. **We take adults of all ages and all abilities** – whether you are a complete beginner having to overcome a fear of water, a seasoned swimmer looking to pick your fitness back up, just looking to improve technique or training for an event.

This will allow us to make recommendations for what programmes would be most suitable, whether we need to be in the water with you, or coach you from the side, and whether/when we can give you fitness programmes to work through.



Name _____ M / F DOB _____

Phone _____ Mobile _____

Email _____

Address _____

Please describe your current swimming ability:

i.e.

Complete beginner – unable to submerge and float

Have a fear of the water, especially putting head under

Don't mind walking, wading and playing in water, but cannot swim any strokes

Swim Freestyle but have trouble with the breathing and cannot go very far

Swim Freestyle and no other strokes / one other stroke

Can attempt most strokes and am able to get through the water but am unaware of correct technique

Please describe any past history/experiences with swimming/being in water

i.e.

A scare in the water involving you or someone you have witnessed (near-miss or drowning incident)

Had some swimming club experience/swimming lessons as a child

Ex-Competitive swimmer (to what level)

Please describe your goals and reasons for getting swimming lessons

i.e.
You recreate a lot around aquatic environments with family and friends, so need to learn to swim to be able to help yourself and others.
Looking for another form of fitness, so want to learn some technique and then get some programmes to work through
Can swim but want more technique or want to learn more strokes
Struggle with the breathing
Work or career opportunity requires you to undergo a swim test

What programmes/lessons do you wish to enrol in? (If known – OR refer to our Adult Swimming Info leaflet and we can help with recommendations on this)

- Adult Learn to Swim Block Courses
- Private Lessons (Individual or two-person)
- Adult Swim Fit Sessions

Do you have any Medical Conditions? (Including allergies / health problems etc. – past or present)

Do you have any injuries, reoccurring physical problems, or physical disabilities? If so please describe

Additional Information – Anything else you think would be handy for us to know

EMERGENCY CONTACT INFORMATION

Name _____ Relationship to you _____
Phone _____ Mobile _____
Address _____