Enrolment



Responsible Person			
Surname:	First Name:		Gender:
Date Of Birth:	Address:		
Suburb:	Postcode:		
Contact No.:	Email:		
Emergency Contact (Not Responsible Person)			
me: Contact No.:			
Student			
Surname:	First Name:		Gender:
Date Of Birth:	Medical Issues:		
Level:	Day:	Time:	
MasterCard Or Visa			
Card Number:			
Name On Card:		Expiry Date:	CVV:
Date:	Signature:		
Agreement (Please Tick)			
Payment is taken one (1) direct debit period in advance, equalling two (2) lessons. If your Swim ARCademy enrolment occurs between direct debit payments, a pro-rata payment of one (1) lesson will be charged.		Cancellations must be lodged by close of business Tuesday, prior to the end of the current debit period. All cancellations must be made via our online Swim ARCademy cancellation form or through our cancellation form available at reception.	
You will be charged a \$15.00 administration fee for each time a payment dishonours.		The direct debit cycle can be located on our website.	
		Minimum enrolment of four (4) lessons before cancellation.	
Suspensions will not be granted during the forty e teaching period throughout the year.	eight (48) week	The cooling off period for Swim ARC eight (48) hours from when the agr	
Suspensions due to illness/injury will only be con- receiving a medical certificate for at least two (2)		You may serve us this notice by han by email to swim@cockburnarc.com	
Authorisation			
I acknowledge that a Cockburn ARC staff member has explained the membership conditions to me.			
I acknowledge that I have read and accepted all the terms stated on this agreement.			
I acknowledge that the full terms and conditions are available on www.cockburnarc.com.au.			
If I do not terminate this enrolment under the cooling off period, I acknowledge that I have read and accepted the full terms and conditions of the Swim ARCademy enrolment on www.cockburnarc.com.au.			
Name:	Signature:		Date:
OFFICE USE ONLY			
Enrolling Staff Member:	Date:		