

It may be necessary for a Coach, Teacher or Club Official to obtain emergency treatment for your son/daughter for which written consent is required. Please complete the form below indicating that you give this consent.

I hereby give permission for a Chase Swimming Club Coach, Teacher or Club Official to obtain emergency medical treatment from a competent medical practitioner, when it would be contrary to my son/daughter's interest in a doctor's opinion, for there to be any delay in seeking my personal consent.

Signature Parent / Guardian (if under 16)

Print Name Date/...../.....

As recommended by Sports Project - a joint initiative between the ASA and the NSPCC

Medical Details

Please state any relevant medical conditions or disabilities

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Please give details of any medication being taken.

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Note: If medication is required during sessions, it should be brought onto the poolside with the approval of the coach.

THE BELOW CHARGES START FROM 1st FEBRUARY 2008

GREAT WYRLEY TEACHING SESSIONS ONLY

**monthly fee payable
by standing order x 12**

60MINS	Teaching Sessions	Per Calendar Month	(Wednesday)	£9.75	(3.00 x 39 session)
			(Sunday)	£8.75	(3.00 x 35 sessions)
45MINS	Teaching Sessions	Per Calendar Month		£7.00	(2.40 x 35 sessions)
30MINS	Teaching Sessions	Per Calendar Month		£4.96	(1.70 x 35 sessions)

DAYS ATTENDING

Wednesday **Sunday**

PAYMENT OF FEES

PAYMENT OF MONTHLY FEES

The above monthly fees are due every month in full and have been calculated as a twelfth of the annual fee. The fee does not change due to holiday, whether yours, the clubs, sickness or injury etc. Should a swimmer be affected by long-term illness, then a break from fees may be authorised by the Committee. Full details to be submitted in writing. Payments are to be made by **Standing Order** for **All Swimmers** and must be presented to your bank for payment on the 15th of each month. (see club notice board).

Payment by cheque may be approved by the committee in exceptional circumstances.

This form is to be accompanied by a Standing Order Form for approval