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ACC #:

**Enrolment Form**

Welcome to Candy Bubbles Aqua Centre. This enrolment form and the contract, Terms & conditions of membership on the reverse hereof MUST be read in their entirety. This form MUST be completed & returned by the participant's next lesson. You will be bound by the terms & conditions in the enrolment form & contract.

**ENROLMENT CONTRACT**

between  
 CANDY BUBBLES AQUA CENTRE and THE PARTICIPANT OR THEIR PARENT/GUARDIAN

**PARTICIPANTS DETAILS**

Surname:	Initials	Name:	
Date of Birth	Age:	Have you been for swimming	<input type="checkbox"/> Y <input type="checkbox"/> N
For how long:			
Have you had a bad experience in water :	<input type="checkbox"/> Y <input type="checkbox"/> N	Give Details:	
Email			
Work #	Home #	Cell #	

**Additional Siblings**

Name:	Name:	Name:
Age:	Age:	Age:
Birth:	Birth:	Birth:

Please indicate which classes the participant will be attending:

<input type="checkbox"/> AquaNauts	<input type="checkbox"/> AquaFitness	<input type="checkbox"/> AquaNatal	<input type="checkbox"/> AquaAngel
<input type="checkbox"/> AquaMaid	<input type="checkbox"/> AquaAssist	<input type="checkbox"/> Pick n Splash	<input type="checkbox"/> AquaPro

Does the participant suffer from any of the following medical conditions:

Heart	<input type="checkbox"/> Y <input type="checkbox"/> N	Epilepsy	<input type="checkbox"/> Y <input type="checkbox"/> N	Ear Disorders	<input type="checkbox"/> Y <input type="checkbox"/> N
Breathing	<input type="checkbox"/> Y <input type="checkbox"/> N	Arthritis	<input type="checkbox"/> Y <input type="checkbox"/> N	Low Muscle tone	<input type="checkbox"/> Y <input type="checkbox"/> N
Allergies	<input type="checkbox"/> Y <input type="checkbox"/> N	Diabetes	<input type="checkbox"/> Y <input type="checkbox"/> N	Fainting/Dizziness	<input type="checkbox"/> Y <input type="checkbox"/> N
Physical	<input type="checkbox"/> Y <input type="checkbox"/> N	Back Pain	<input type="checkbox"/> Y <input type="checkbox"/> N	High Blood Pressure	<input type="checkbox"/> Y <input type="checkbox"/> N
APGAR:				Major operations	<input type="checkbox"/> Y <input type="checkbox"/> N

Any other condition not mentioned above:  
 Please give details to any conditions marked YES:

**Medical Aid Detail**

Medical Aid:	Doctors Name	Emergency #
Medical Aid #:	Dr's Tel Number	

**Parent /Guardian Details**

Mom:	Surname:	Email:
Work #:	Home #:	Cell #:
Physical Address		
Postal Address:		ID:
Dad:	Surname:	Email:
Work #:	Home #:	Cell #:
Physical Address		
Postal Address:		ID:

I/We agree to pay all fees due to Candy Bubbles Aqua Centre on time and up to date.  
 I/We hereby certify that the details given are both true, correct and confirm that I/We have read and understand the terms and conditions herein, and agree to be bound hereby.(next page)  
 Candy Bubbles will conduct a credit enquiry on the client for the purpose of setting a limit in respect of the services provided and the Client gives consent for this enquiry to be conducted  
 Please supply us with a copy of ID's for all parties involved e.g... Mother, Father / Guardian

## TERMS AND CONDITIONS OF MEMBERSHIP

Please ensure that you read this document and take careful note of its contents to avoid any ill feelings later.

- 1 Fees are payable cash, cheque made out to Candy Bubbles or via Internet transfer, before the 2nd week of the New term. Fees paid after the 2nd week of the term will be charged at **2% interest** above prime, per week for every week your fees remain in arrears.
- 2 All payments made at the centre are to be placed in an payment envelope and only payments received in the locked payment box will be accepted. We will not be held responsible for payment via a third party.
- 3 All charges for Rd cheques or bad payments will be for your cost.
- 4 Internet transfers are welcome to be made to: Bank: Nedbank bank, Branch: Sunninghill (No: 155605), Account name: Candy Bubbles, Account number: 1556015984. Please submit proof of payment to the swimming school, your account will not be credited until proof of payment has been received. Please use Account number as your **reference**. E.g. CAN009
- 5 The swimmer, their parent / guardian agrees to pay all charges including **legal fees** which may arise in the event that legal or other action is taken by Candy Bubbles to recover any fees or amount due, including, but not restricted to, collection commission, whether action is commenced or not.
- 6 Once a **single lesson** has been attended it is accepted that the terms and conditions of Candy Bubbles as set out in this document are automatically accepted by the swimmer, their parent / guardian.
- 7 **TERMINATING LESSONS:** Membership shall continue for an indefinite period subject to one terms notice, or one month's fees in lieu of notice to be paid on leaving the swimming school.  
All **notices** must be in writing and must be hand delivered or posted via registered mail to Candy Bubbles no later than the 1st day of your last swimming month.  
The registration joining fee will is nonrefundable
- 8 Classes are given throughout the year. The swimming school is closed on public holidays and Sundays. We will be closed over the Easter weekend, the week of Christmas and the week of New Year. Seasons follow **Private School holidays**.
- 9 Swimmers must attend lessons with a suitable swimming costume. Swimmers must supply their own towel. All swimmers **MUST** wear swimming caps, at all times. Swimmers not wearing a cap will be issued with one, issued with one, the cost of which will be added onto the end-of-month statement.
- 10 **Lessons missed**, cancelled or not attended will **NOT** be caught up unless these lessons are made up during that current term and the times suits both the participant and Candy Bubbles. Those lessons missed due to a **Public Holiday** will not be caught up. **Make-up lesson** are only offered for **lightning** and if a **Doctors notes** is presented.
- 11 Your child/ren may not run around the pool surround nor enter the water before or after a lesson without the teacher's permission.
- 12 Swimmers must blow their noses and go to the toilet before starting a lesson.
- 13 Please leave the toilet the way you would like to find it, and do not let children under the age of 5 go to the toilet unsupervised.
- 14 Do not allow children to **play** in the change rooms.
- 15 Should the swimmer **misbehave** and **disrupt** a lesson he / she will be given a warning, should he / she persist with such behaviour, he / she may be requested to leave the class.
- 16 The guardian or parent undertakes to supervise their child/ren outside of the swimming lesson times.
- 17 Candy Bubbles will not be liable for the loss or misplacement of any articles belonging to the swimmer or any person entering the premises of Candy Bubbles Aqua Centre

I hereby waive any claim which I may at any time have against either Candy Bubbles, it's owners or the owners of Candy Bubbles Aqua Centre, and any instructor, staff member, employee or any person in any manner whatsoever for any personal or patrimonial loss or damage that may be suffered by me/us as a result of the tuition to be received by me/us at or caused by:

The area leading up to the facilities adjacent to or necessary for the proper use of, the immediate surrounds of, and the pool itself where the tuition of training is offered from time to time and which damages are caused by My/our instructions by his/her employees, assistants, sub-contractors, my/our or other person's negligence or by act of any animal or insect, or any defect in the construction or design of the pool, its surrounds or facilities or any other person.

I/We waive or abandon any claim I/We have against Candy Bubbles aqua Centre for loss or theft of, damage to any property owned by Me/Us under My/Our care while on or near the premises where tuition of training is offered.

Signed at: \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Mothers Full Name \_\_\_\_\_ Fathers Full Name : \_\_\_\_\_

Mothers Signature \_\_\_\_\_ Fathers Signature \_\_\_\_\_