



Vicky Sands ASA FIST

01342 316232 - 0785 589 6246

The Oaks, Hackenden Lane, East Grinstead, West Sussex, RH19 2DL

Lessons for babies and children, from birth to 14 years old, are available at 'Limpsfield Grange School', Bluehouse Lane, Oxted. Mondays from 4.00pm - 8.00pm Tuesdays 9.30am - 12.30pm and 4.00pm - 8.00pm.

We have over 300 members, Splash is a teaching club where children progress by ability rather than age. Babies and toddlers learn through games and songs. We teach all four strokes, personal survival and a wide range of water skills.

Teachers are in the water with the children until they are competent to swim alone.

Pupils are encouraged by gaining ASA and STA distance and water skill awards. Badges and certificates are available for purchase. Please check at the end of each term to see what your child has achieved.

Please park only in marked bays. Children must not play in the school grounds.

Lesson Fees and Payment Options

All sessions £93.50 for 11 weeks @ £8.50 per lesson

Cheques dated 15th April 2018. Payable to 'V.J Sands' (not Splash). Please write the pupil's name on the back.

If paying by Bank Transfer, please write your bank details on the reverse of this form, so we can match your transfer.

Bank Acc: Mrs VJ Sands Account: 11001828 Sort: 60-04-35

Payment is required in advance. Please book in before term ends 26th/27th March to secure your place After that places are offered to those outside of the club.

Term Dates 2018

TERM STARTS

Mon 23rd and Tues 24th Apr

NO SWIM / MAKE-UP (for snow 27th Feb)

Mon 7th (no swim) and Tues (make up) 8th May

HALF TERM

Mon 28th and Tues 29th May

TERM ENDS

Mon 16th and Tues 17th July

Visit www.splashswimming.co.uk or [fb.com/splashswimmingoxted](https://www.facebook.com/splashswimmingoxted) for more information and bad weather closures.

Splash Swimming Club - Registration Slip - Spring Term 2018

(Please complete and return with payment to secure place)

Pupils Name: _____

Date of Birth: _____

Address: _____

Car Registration: _____

Telephone No.: _____

E-Mail Address: _____

Next of Kin: _____

Relationship: _____

Please state below any relevant medical, educational, physical or psychological conditions that you or your child may have:

Lesson Time: _____
