



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 10.00am - 11.00pm and 4.00pm – 8.00pm.

We have over 200 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 x 11 weeks @ £8.50 per lesson  
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 and is non-refundable. Please book in before term ends to secure your place  
After that places are offered to those outside of the club.

### Term Dates Spring 2020

#### TERM STARTS

Monday 13th and Tuesday 14th January

#### HALF TERM

Monday 17th and Tuesday 18th February

#### TERM ENDS

Monday 30th and Tuesday 31st March

By registering for lessons, you are consenting to us storing and processing your information for up to a year. We may use it for lesson updates and occasional promotional material.

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

## Splash Swimming Club - Registration Slip - Spring Term 2020

(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: \_\_\_\_\_