



NORWOOD SWIM SCHOOL

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SQUAD FEE ADJUSTMENT REQUEST FORM

If you wish to apply for an adjustment to your squad fees for a swimmer's absence of more than two weeks (Swimmers who swim in Aquajets, Langman, Bastian, Stephenson's, Cowdrey, Hill, National and High Performance squads ONLY), please complete this form and **return it to Norwood Swim School, Coaching Administrator, 273 The Parade, Beulah Park SA 5067.**

DATE _____ SQUAD NAME _____

① RESPONSIBLE PERSON DETAILS

Family Name: _____ Home Phone Number: _____
Address: _____ Suburb: _____ Postcode: _____
Email Address: _____

② INDIVIDUAL SWIMMER DETAILS

First Name: _____ Date of Birth: _____ Age: _____

③ REASON FOR REQUEST FOR SQUAD ACCOUNT ADJUSTMENT:

If a swimmer suffers any serious injuries or illnesses, e.g. fractured limbs or glandular fever, which necessitate a prolonged absence from training or more than 2 weeks, consideration may be given to adjusting the account in the following month.

Dates of Absence: _____ to _____

Medical Certificate attached
If swimmer has been absent for more than 2 weeks with a medical condition please attach medical certificate.

Amount of Account Adjustment Requested: _____

Parent / Guardian / Swimmer (over 18) Signature: _____

SQUAD SWIMMER ABSENCE POLICY

Swimmers who swim one lesson per week only (Stingray, Aquajets, Langman, Bastian and Stephenson's)
Missed sessions can be made up at anytime as long as you have made a booking (subject to availability) and it is taken as an extra session in any month from which the normal monthly fee has been paid. After two weeks of non – attendance and no notification your position in the squad will be forfeited if the monthly fee has not been paid.

Swimmers who swim two or more times per week. (Aquajets, Langman, Bastian, Cowdrey Hill, Stephenson's, National and High Performance Squads)
Please advise reception staff if you will be absent for 1 week or longer. If a squad swimmer, swimming twice or more per week misses two or more consecutive weeks in a month consideration may be given to adjusting the account in the following month (**A maximum of 30% discount off the full monthly fee may be given**). Should a swimmer miss intermittent session then full monthly fees will apply.

Note: To attain a reduction in fees you must complete the squad fee adjustment request form and the swimmer's coach **MUST sign the Squad Fee Adjustment Request Form.**

④ COACH SIGN OFF - (Hill, National and High Performance squads ONLY)

Please ask your squad coach to sign here to verify your absence for more than 2 weeks.

Coach Name: _____ Coach Signature: _____ Date: _____

OFFICE USE ONLY

- Full adjustment approved, credit processed
- Adjustment part approved, family advised with reasons, credit processed
- Adjustment not approved, family advised with reasons

Date Completed: ____ / ____ / ____ Coaching Administrator: _____