

# AEROTUMBLERS DIVING CLUB

\*(Please submit this registration form with all particulars filled in appropriately)

*\*For Official Use Only:*

Start Date: \_\_\_\_\_

Class Time: \_\_\_\_\_

Payment: \_\_\_\_\_ Month: \_\_\_\_\_

## Swimmer/ Diver's Personal Particulars

Interest in signing up: LEARN TO DIVE  / LEARN TO SWIM

-Please Tick Box Provided-

Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ NRIC: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Contact: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ S(\_\_\_\_\_)

Current Swimming abilities or certificates attained (NASSA/ Swimsafer stages): Able to swim 50m - YES / NO

## \*Medical conditions/Allergies/Learning Difficulties:

(Please list any conditions you/ your child has including skin allergies, diabetes or epilepsy)

## Parent/ Guardian/ Spouse Contact Information:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Contact Numbers: (Hp) \_\_\_\_\_ (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

\*(Mobile-Phone number recommended as latest information and notifications will be sent through SMS)

## Indemnity Clause (To be signed by participant or parent/ guardian- Above 21 years of age)

The Coach reserves the right to cancel lesson/s in events of bad weather conditions or other dangerous causes.

I, \_\_\_\_\_ would like my child/ ward \_\_\_\_\_ to participate in the stated Diving /Swimming program organized by Aerotumblers Diving Club.

"I hereby undertake to indemnify 'Aerotumblers Diving Club' as the service provider, its employees, staffs, teachers & coaches against all claims arising out of death, injury, damage or loss suffered and caused in the course of any Swimming/ Diving activities conducted. This includes all costs and expenses incurred as a result of such claims."

*I agreed to all of the terms & conditions stated on this form & fully understand the outlines of the program*



\_\_\_\_\_  
Signature of Participant/ Parent

\_\_\_\_\_  
Date of Registration