



SWIMMING

How To Book Your Place, Pay And When To Pay

SWIMMING

- To confirm your place a **\$70 non-refundable deposit** should be paid to NSS account 010 274 0013810 00 (reference should be your child's surname), by Thursday 12th December 2013.
- The remainder of the balance is to be paid no later than Monday 6th January 2014.
- Full Day Camp Total Cost - \$295 Mon 13th – Fri 17th Jan 9:30am – 3:30pm
- Half Day Camp Total Cost - \$150 Mon 13th – Fri 17th Jan 9:30am-12:30pm or 12:30-3:30pm
- Individual Stroke Clinics – Free; Fly; Back; Breast \$55.00 per clinic – times as shown below – limited to 24 spaces per clinic – these clinics fill quickly book early
- Please complete the following details and email or post to NSS

Email: camps@nss.org.nz

or Post: 'Camps', North Shore Swimming, PO Box 302 145, North Harbour, Auckland

What to bring: Togs, gear bags (fins, pull-buoys and kickboards, snorkel if you have one), at least one drink bottle, clothes and footwear for dry land work, lunch and at least two healthy snacks. Also a hat and sunscreen for outdoor activities and most importantly a really positive, 'have -a- go' attitude!!

For enquiries about the camp please email Gary Francis, gary@nss.org.nz

Name: _____ DOB: ___/___/___ Male ___ Female ___

Address: _____ Home phone _____
Mobile phone _____
email _____

Current swim Club, swimming level, and level of experience _____

Half - Day Camp:

(13th – 17th Jan 9:30am to 12:30pm
Or 12:30 – 3:30pm)

Individual Stroke Clinics

Freestyle(Jan 20th, 10:00am-12:00pm)

Butterfly (Jan 20th, 1:00pm-3:00pm)

Backstroke (Jan 21st, 1:00pm –3:00pm)

Breaststroke(Jan 22nd, 10:00am- 12.00pm)

Full – Day Camp:

Monday 13th – Friday 17th Jan
9:30am – 3:30pm

For Office use: Deposit paid

Full amount/balance paid

Medical Information:

Please list any current medical conditions that may affect your child's level of participation while at camp: _____

Please name and give details of any medication your child will be taking whilst on camp: _____

Emergency Contact details:

1) Name _____ Number _____
2) Name _____ Number _____