STANFORD SWIM SCHOOL 2017-2018 Application Form

Po Leung Kuk Ngan Po Ling College
Address: No.26, Sung On Street, To Kwa Wan.
Service Hotline: 2267-8866

Student Swimming Level： **(Swimming level will be arranged to student according to your following choices.)**

☐ **Never Swim Before** ☐ **Able to swim Freestyle: _____m** ☐ **Able to swim Backstroke: _____m**
☐ **Basic Swimming skill** ☐ **Able to swim Breaststroke:_____m** ☐ **Able to swim Butterfly: _____m**

Every Friday, Saturday, Sunday Course

Date		Every	One hour per lesson.				Fee
D5	☐ 3/11 – 2/3 (17 Lessons) (16/2 suspended)	Fri.	PM	(173) ☐ 05:45 (183) ☐ 06:45	(193) ☐ 07:45	(203) ☐ 08:45	(213) ☐ 09:45	$168 (Lesson)
D6	☐ 4/11 –3/3 (17 Lessons) (17/2 suspended)	Sat.	AM PM	(083) ☐ 08:30 (123) ☐ 12:30 (163) ☐ 04:30 (183) ☐ 06:30	(093) ☐ 09:30 (133) ☐ 01:30 (173) ☐ 05:30 (193) ☐ 07:30	(103) ☐ 10:30 (143) ☐ 02:30 (203) ☐ 08:30	(113) ☐ 11:30 (153) ☐ 03:30	
D7	☐ 5/11 –4/3 (17 Lessons) (18/2 suspended)	Sun.	AM PM	(083) ☐ 08:30 (123) ☐ 12:30 (163) ☐ 04:30 (183) ☐ 06:30	(093) ☐ 09:30 (133) ☐ 01:30 (173) ☐ 05:30 (193) ☐ 07:30	(103) ☐ 10:30 (143) ☐ 02:30 (203) ☐ 08:30	(113) ☐ 11:30 (153) ☐ 03:30	

Remark: Not valid with any other discount or offers.

STUDENT REMINDER：1. All successful applicants will not be notified. Parents are requested to arrange delivery and pick-up of your children on their own and report at the pool reception 15 minutes prior to the class according to the date and time in the time-table.
2. All students (Except student in Adult class) are compulsory to wear the "Stanford Swimming Cap" and bring "Student handbook" during the lesson; the cap ($98) and the handbook ($90) is available for purchase at pool reception.
3. Please study our school "Guidelines for Parents & Students" showing on our website: http://www.stanfordswim.com.hk before enrollment.

Student Information

Name_____ **Sex** _____ **Age**_____

Mobile No. _____ **Home** _____ **Date of Birth** _____(D)_____(M)_____(Y)

Address_____

E-mail _____ **School** _____

Payment Method A 1. ☐ **Credit Card**: 2. ☐ VISA ☐ MasterCard

3. Credit Card No.：⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 4. Expiry：⌊_⌋⌊_⌋M⌊_⌋⌊_⌋Y

B ☐ **Post by Cheque, Cheque Heading "STANFORD SWIM SCHOOL"**
(Please write down the *Name of Students* and the *Phone Number* on the back of the cheque before post)

C ☐ **Fax by Bank Slip, BOC: 012-814-1-004766-9 / HSBC: 116-717828-838**
(Please write down the *Name of Students* and the *Phone Number* on the Bank Slip before fax, Fax 23221396)

Official Use Only_____
17SD 18SFA weekend

This form expires on 30-12-2017

Condition 1: This is certify that my health is in a good condition, without any serious disease which causes unsuitability in participating swimming classes. If I fail to follow instructions from coaches who lead to any causality, Stanford will not bear any responsibility
Condition 2: If there are not enough students in that particular timeslot, Stanford reserves the right to arrange the student to another timeslots
Condition 3: If there are not sufficient students at assigned courses, the School has reserved the right to arrange students at different levels.
Condition 4: I agree the above information may be used in this company or its subsidiaries for developing new strategies and better services.

Signature ：_____
Name ：_____
Date ：_____