**Swim Bournemouth Trial Application Form**

Thank you for your interest in having a trial with Swim Bournemouth. Please could you complete the below form and then send to [enquiries@swimbournemouth.uk](mailto:enquiries@swimbournemouth.uk). The Swim Bournemouth team will then help arrange the trial.

We aim to run trials on the 1st and 3rd Sunday of every month at Canford School Leisure Centre. Please complete the form so that we can collect some important information in order to consider a trial.

You will be invited to join one of our trial sessions and be informed of the date & time of your trial. Please be aware that demand for trials is high and you may not be invited to the next scheduled trial, you may be given a date in the future, if the next scheduled trial is over-subscribed.

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| **Parent Information** | |
| **First Name** | **Last Name** |
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| **Address Line 1** | **Address Line 2** |
|  |  |
| **Town / City** | **Post Code** |
|  |  |
| **Email Address** | **Contact Number** |
|  |  |

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| **Swimmer Information** | |
| **First Name** | **Last Name** |
|  |  |
| **Date of Birth (DD/MM/YYYY)** | **Current Swimming Level**  **(i.e. Competitive / ASA Swim Lesson Level)** |
|  |  |
| **Transferring from another club (Yes/No)** | **Country of Representation:** |
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| **Miscellaneous** | |
| **How did you hear of Swim Bournemouth?** |  |
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