MALDON SHARKS ASSESSMENT FORM

|  |  |
| --- | --- |
| Date: |  |
| NAME OF SWIMMER:AGE:CONTACT NAME:EMAIL:MOBILE NUMBER: |  |
|  |  |
| ASA SWIMMING LEVEL ACHIVED | DISTANCE AWARDS (if any) |
| 7891011 | 200 meters400 meters800 meters1 mile |  |
|  |  |  |
| SHALLOW DIVING CERTIFICATE | YES: | NO: |
|  |  |  |
| NAME OF CURRENT SWIMSCHOOL |  |  |
|  |  |  |
| IF CURRENTLY RECEIVING LESSONS Weekly | Half Hour | One Hour |
|  |  |  |
| NAME OF CURRENT SWIMMING CLUB | ASA No: |  |
| How did you hear about Maldon Sharks Swimming Club |  |  |
| Web - email | Web - club phone |  |
| SWF | Blackwater |  |
| Personal recommendation | Other |  |