



The Sports Club of Gujarat Ltd.  
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Please tick (✓) appropriate box.

Batch Timing:

- ☐ 11:00 am to 12:00 pm  
☐ 12:00 pm to 1:00 pm

| Dates |    |
|-------|----|
| From  | To |

## Aqua Aerobics Form

| INWARD |
|--------|
| No.    |
| Date   |

Name of Member : \_\_\_\_\_ Mem.No. \_\_\_\_\_

Participant's / Guest Participant's Name : \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age : \_\_\_\_\_ Gender : MALE / FEMALE

Mob. : \_\_\_\_\_ (R) : \_\_\_\_\_

**Member** ☐ Monthly Fees Rs.2,542+SGST Rs.229+CGST Rs.229 = **Rs.3,000** (12 Sessions/month)

**Guest** ☐ Monthly Fees Rs.3,390+SGST Rs.305+CGST Rs.305 = **Rs.4,000** (12 Sessions/month)

### Guest Proposed by

Member's Name : \_\_\_\_\_

Mem.No. : \_\_\_\_\_

Mob No.: \_\_\_\_\_

Signature of the Member

### Rules & Regulations

1. Duration : **3 Days a Week, 12 Sessions a Month.**
2. There will be no coaching on Sundays and Public Holidays.
3. The learner will be allowed in Club during coaching time only and will not be permitted to use any other activity of the Club.
4. Coaching fees shall be payable in advance on the first day of particular month.
5. Club or coach shall not be held responsible for any accident during the coaching time.
6. **Club shall not be responsible for any kind of injury, accident or loss of life happening to the guest in the swimming pool of the Club.**
7. Admission right reserved and at complete discretion of Club authority.

### Disclaimer

I / We \_\_\_\_\_ hereby confirm that I / we have read, understood and agree to abide by the Bye-Laws for use of Swimming Pool.

Myself, my son / daughter and guest will use the swimming pool and associated facilities entirely at his / her own risk and waive any claim I may have against the club management and its staff arising from any injury / mishap which he / she may suffer directly or indirectly as a result of use of the Swimming pool, Pool Equipment or its Changing facilities.

Date

Signature of the Applicant

Signature of the Member

A/c Code: 33360220

## SWIMMING POOL RULES

1. The monthly swimming pool charges will be included in the monthly bill of the member.
2. A month for this purpose shall be a calendar month.
3. Application form to be sent on or before last date of the month, preceding the month to which the member desires to avail swimming pool coaching facilities. Swimming coaching facilities shall not be given to any one on DAILY CHARGE basis.
4. Form to be handed over directly to the Swimming Pool counter or at the Club office to avoid any inconvenience.
5. Batch No.6 is only for children / members selected by Coach to participate in Swimming Competitions and further training.
6. On completion of 4 years, member's children shall be eligible for coaching.
7. **CAUTION**
  - Member will enter the pool at his own risk. Club holds no responsibility for any mishap, accident, injuries to or death of member, his family members or his guest/s in the swimming pool and its surrounding area.
  - Club is not responsible for any loss or damage to personal belongings of member. Please keep your valuables in the lockers at your risk only or avoid bringing valuables to the pool.
  - Parent of the child shall always remain present during coaching of the child.
  - Learners shall not swim without the permission of the coach, and beyond the line specifically marked for them.
  - Only adult swimmers are allowed to enter the pool after 7.00 pm.
  - Guests who do not know swimming shall not be permitted inside the pool.
  - If any problem is noticed among any of the swimmers, immediately contact the coach and / or lifeguard.
  - Members as well as children, during general and coaching timings, shall adhere to the instructions of coach.
8. **DOs**
  - Enter your name, mem. no. and your guests' names legibly in the register with the attendant before entering the pool.
  - Take shower before entering the pool.
  - Keep the changing room and toilets clean.
  - Individual with long hair must wear a swimming cap while swimming.
  - Always take necessary precaution before diving / jumping in the pool.
9. **DON'Ts**
  - Children under 3 yrs. of age are not allowed in the pool.
  - Children under 5 yrs. of age are not permitted inside the pool without accompanied by an adult member or coach.
  - Members are not allowed to enter the pool with oil applied on their body.
  - No person with any infection or skin disease shall enter the pool.
  - Do not spit inside the pool or wear unsuitable swimming costumes.
  - Do not bring any foreign object inside the pool without permission.
  - Smoking is not permitted in the swimming area.
  - No breadth-wise swimming except during coaching is permitted.
10. Any violation of the above rules may invite disciplinary action.

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### DISCLAIMER

I hereby confirm that I have read, understood and agree to abide by the Bye-Laws / Rules for use of Swimming Pool.

I will use the swimming pool and associated facilities entirely at my own risk and waive any claim I may have against the club management and its staff arising from any injury / mishap which I may suffer directly or indirectly as a result of my own use of the Swimming pool, Pool Equipment or its Changing facilities.

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Date

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Signature of the Applicant

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Signature of the Member

## MEDICAL FITNESS CERTIFICATE

For Guest only

This is to certify that I have carefully examined Mr./Ms. \_\_\_\_\_

Based on the examination, I certify that he / she is in a good mental and physical health /

suffering from the following diseases marked ☒ :

- |                                                 |                          |
|-------------------------------------------------|--------------------------|
| 1. Cold & Flue                                  | <input type="checkbox"/> |
| 2. Jaundice                                     | <input type="checkbox"/> |
| 3. Venereal Disease or Skin Disease             | <input type="checkbox"/> |
| 4. Pulmonary T.B.                               | <input type="checkbox"/> |
| 5. Urinary Disease                              | <input type="checkbox"/> |
| 6. Worm Infection                               | <input type="checkbox"/> |
| 7. Dysentery                                    | <input type="checkbox"/> |
| 8. Vertigo / Hysteria                           | <input type="checkbox"/> |
| 9. Heart Problem / Breathlessness / Asthma      | <input type="checkbox"/> |
| 10. Any other physical defects (Please specify) | <input type="checkbox"/> |

In view of the above, in my opinion, he / she may be permitted / not permitted to enter the Swimming Pool.

Passport size  
Photograph  
of the Applicant

\_\_\_\_\_  
Signature of Medical Officer

Full Name :

Address :

Regn. No. :

Seal

Date: