

FORM A

Swim Squad Reimbursement Form **(1/9/11 - 30/4/12)**

Name: _____

Squad Type: _____

Sessions (per week): _____

Amount to be refunded: _____
(Please use table below)

For Mini/Junior Squads;

Attending 1 session/week	Nippers will refund \$23.40
Attending 2 sessions/week	Nippers will refund \$42.10
Attending 3 sessions/week	Nippers will refund \$56.20

For Intermediate/Advanced Squads;

Nippers will refund HALF the cost of Squad Passes Purchased on or after 1/9/11.
(Applies to 20 visit & Monthly passes only)

(PLEASE NOTE THERE IS NO SUBSIDY FOR POOL ENTRY PASSES).

Attendance verified by;

Squad Instructor Name:	Venue/Location:

Name of Parent Claiming: _____

Phone No: _____

Signature of Parent: _____

Payment will be via EFT:

Account BSB :	
Account Number :	
Account Name :	

Approved by: _____ (Craig Law or Verelle Southgate)

(Leave completed form with proof of payment/receipt at Club Reception for JAC Treasurer)