

## APPENDIX 1 - Children's Swimming Ability and Water Confidence Form

To assist with our planning for water based activities, please complete the information below for your child regarding their swimming ability and confidence in the water.

Centre Details	
Centre/Service Name: Ashburton Pool and Recreation Centre Vacation Care Program	
Child Details	
Child's Full Name:	Date of Birth:
Is there any reason, medical or otherwise that may impact on your child's participation in water based activities:	
<input type="checkbox"/> No <input type="checkbox"/> Yes	
If Yes, please provide details:	
Parent/Guardian Details	
Parent/Guardian Name/s:	Contact Number/s:
Parent/Guardian Signature:	Date:
Swimming Ability and Confidence in the Water – please select the category below which would best describe your child's current water confidence and swimming ability (please tick one box below)	
Child can't swim and is not confident in the water	<input type="checkbox"/>
Child can swim but is not confident in the water	<input type="checkbox"/>
Child can swim and is confident in the water	<input type="checkbox"/>
Child can swim a number of strokes and is very confident in the water	<input type="checkbox"/>

Please note this form is to be completed in addition to the 'YMCA Victoria Excursion and Regular Outing Authorisation Form'.