Swim Improver Course

October half term

Dear Parent/ Guardian,

We are writing to inform you of our swim improver lessons that are running throughout the October half term 27/10/25 – 31/10/25 at Albert Avenue Pools. These swimming lessons will take place every day of the week, each lesson lasting half an hour, there is different ability classes starting from Non-swimmer to swimmer. Your child/children will be booked onto the full week. If you wish to do these lessons, please fill out the attached form and return it to reception.

This course is designed to enhance swimming skills and build confidence in a fun, supportive environment. The cost is £29 per child, which includes five sessions and additional free swims in any of our public sessions, while the course is ongoing. Following the crash course, children will have the opportunity to apply for our afterschool swim schools to continue their progress.

For any questions or further information, please feel free to reach out to us at education@hcandl.co.uk.

Best regards,

Hull Culture and Leisure

Working in partnership

Data Protection

We are committed to responsible data management and subscribe to the principals of the data protection legislation in the United Kingdom. We are committed to maintaining the privacy of our users and maintaining the security of any personal information received from you. If you register for any of the service, you will be asked to provide basic personal information. The information provided by you is not available for sale or use by third parties. The information is used solely for the purpose it was collected for or to update you on website/service changes.

Application for Swim Improver course

Albert Avenue Pools

Please complete the form below using a ball point pen and hand into the Leisure centre reception together with your payment of cash/debit/cheque. Please ask a member of staff if you need any assistance.

PRINT CLEARLY IN BLOCK CAPITALS

Child First Name	Child Surname		**Official Use only**
Parent/Guardian name	Date of Birth		**Card No**
Address Post code:	Contract Parent/Guardian Email address:		**Payment amount**
Telephone/mobile:	Telephone/mobile:		**Date**
Any Medical detail we need to be aware of:		**New Member** (please tick)	**Receptionist**
		Existing member number (please tick)	**Receipt No**
			Centre

Please read and sign below: Has your child previously undertaken swimming lessons: Yes / No **Please tick below which class you would like your child**				
10:00-10:30 None swimmer Duckling -stage 3	10:30-11:00 None swimmer Duckling -stage 3	11:00-11:30 None swimmer Duckling -stage 3	11:30-12:00 Swimmer to improver	

I understand that once my child has enrolled on to the Swimming Crash Course no refunds will be issued if I choose to cancel after the first class.

Signed Parent/Guardian: _____ Date: _____

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