

**KWAZULU-NATAL AQUATICS**  
**REGISTRATION SCHEDULE 2008/2009**

(Please complete in box letters)

CLUB: \_\_\_\_\_

DATE : \_\_\_\_\_

(Please tick the appropriate box)

No.	Name	Level	Swimmer	Waterpolo	Diver	Synchro	Official	Upgrade	Transfer	Amt Paid	Concession
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											

CLUB SECRETARY SIGNATURE: \_\_\_\_\_

TYPE OF PAYMENT: DIRECT DEPOSIT (AT WHICH BRANCH) \_\_\_\_\_

INTERNET BANKING

CASH / CHEQUE

For office use only

DATE RECEIVED: \_\_\_\_\_

COPY OF DEPOSIT RECEIVED

YES / NO

**Batch No:** \_\_\_\_\_