





**REGISTRATION FORM  
SWIMMING POOL K BLOCK PHASE-V  
RESIDENTS**

Document Reference:  
4488003

**12. Timings:**

<b>Ladies:</b>		
a.	Shift – 1	1100 – 1200
b.	Shift – 2	1200 – 1300
c.	Shift – 3	1300 – 1400
d.	Shift – 4	1400 – 1500
e.	Shift – 5	1500 – 1600

<b>Gents:</b>		
a.	Shift – 1	0830 – 0930
b.	Shift – 2	0930 – 1030
Coaching Timings		1615 – 1815
c.	Shift – 3	1830 – 1930
d.	Shift – 4	1930 – 2030

**Note:** Please indicate the shift timings in which you are interested to do swimming. (Shift will be assigned on aval)

**13. Maint Day:** Saturday will be observed as maint day and S/Pool will remain closed, however quarterly maint / water changing days will be communicated on req basis.

**14. Instructions:**

- Membership is for the specific Sports Complex/Swimming pool, only.
- Cat of Senior citizen w.e.f 11<sup>th</sup> Oct 2018 is 65 yrs & above.
- Details of registration fee and monthly subs can be obtained from the reception desk. Registration fee / Subs will be nonrefundable.
- DHA has the right to cancel the registration on violation of its sports standing operating procedures or bye laws, w/o assigning any reason.
- Rights to admission are reserved with DHA authority.
- Guests accompanied by the members will only be permitted with payment.
- The detailed instructions are displayed on the screen & the members are required to read them for observance.
- Dress code of DHA Sports is to be strictly followed.
- All charges /subs will remain applicable till 31<sup>th</sup> Aug 2019; rate may be revised w.e.f 1<sup>st</sup> Sep 2019.
- Parents / Adult guardians must accompany children between **05-10 years** of age. **U/05** not permitted.
- Duplicate card surcharge will be paid Rs. 100/- and for 3<sup>rd</sup> time member will be pay Rs. 500/-.
- Below mentioned certificates will be given by the parents/guardians and Medical officer DHA medical center respectively:-

**CERTIFICATE BY PARENTS / GARDIANS**

I Mr. / Mrs. / Miss \_\_\_\_\_ S/O, D/O, W/O \_\_\_\_\_ certify that Mr. / Miss is my Son / Daughter / Guest and he/she \_\_\_\_\_ is a good swimmer. In case of any injury or incident, the guardian shall be responsible w/o any liability on DHA.

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Date: \_\_\_\_\_

**MEDICAL FITNESS CERTIFICATE**

It is certified that Mr. / Mrs. / Miss. \_\_\_\_\_ S/O, W/O, D/O \_\_\_\_\_ does not suffer from any communicable disease, fungus & skin disease or handicapped.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Validity Date: \_\_\_\_\_ (For One Year)

Medical Officer: \_\_\_\_\_

**(DHA Medical Centre)**

Stamp with Name: \_\_\_\_\_

**15. Freeze / Defreeze Cases Policy Sports Complexes / S – Pool Complex:**

- A member opts to freeze his membership if he can't attend the facility for a month or more.
- The member will be charged 5% of the subs for the freeze pd.
- The member applies in writing at least ten days in advance for freezing of his membership indicating the duration of his absence.
- Member will not be permitted to enter the complex till defreezing of his membership.
- If a member joins back during the freeze pd, he will have to pay full subs for that month.
- Membership will stand temp blocked, if the member fails to pay monthly subs for one month without freezing of membership.
- Blocked membership will be restored on payment of the outstanding subs plus 15% of penalty on regn for non-payment.
- In the event of non-payment of subs for continuous six months by the member, the membership will stand cancelled. New registration will be req to restore the membership.
- If a member can't attend a facility for Six months or more, he may opt for suspension of membership and on return may resume utilizing same facility by paying 50% of the regn charges.

**Note:** I have read all the above instructions and freezing policy.

Signature of Applicant: \_\_\_\_\_