

OTTO SWIMMING CLUB

**OUTSTANDING FEES PAYMENT COMMITMENT FORM**

**AGREEMENT**

**(This form must be handed to the treasurer before 19 July 2016)**

|  |
| --- |
| FULL NAME:  |
| ID NUMBER :  |
| ADDRESS : |
| CELL: EMAIL: |

I hereby accept full responsibility for payment of all outstanding fees due to OTTO AQUATICS as outlined below ...

|  |
| --- |
| SWIMMER 1:  |
| SWIMMER 2: |

A.GALA FEES

|  |  |  |
| --- | --- | --- |
| AMOUNT OWING | SEASON PERIOD | FINAL DATE FOR PAYMENT  |
|  | 2015/2016 AND 2016/2017 | OVERDUE/IMMEDIATE  |

B. MONTHLY FEE PAYMENT-

|  |  |  |
| --- | --- | --- |
| AMOUNT OWING  | FINAL DATE FOR PAYMENT  | MONTHLY AMOUNT TO BE PAID |
|  | **7TH DECEMBER 2016** |  |
| OTHER PAYMENT OPTION/S  |

C. KZN REGISTRATION FEES/ CONCESSION APPLICATIONS – 2015/2016

|  |  |  |
| --- | --- | --- |
| AMOUNT OWING | SEASON- PERIOD | FINAL DATE FOR PAYMENT  |
|  | 2015/2016 | OVERDUE/IMMEDIATE  |

D. KZN REGISTRATION FEES/ CONCESSION APPLICATIONS FOR 2016/2017

|  |  |  |
| --- | --- | --- |
| AMOUNT OWING  | FINAL DATE FOR PAYMENT  | MONTHLY AMOUNT TO BE PAID |
|  | **7TH DECEMBER 2016** |  |
| OTHER PAYMENT OPTION/S  |

**Acknowledgement – PARENT**

|  |  |
| --- | --- |
| **NAME**  |  |
| **SIGNATURE**  |  |
| **DATE**  |  |
| **WITNESS : NAME AND SIGNATURE**  |  |
| **WITNESS: NAME AND SIGNATURE** |  |

**Club Administration – OTTO AQUATICS**

|  |  |
| --- | --- |
| **SIGNATURE – TREASURER**  |  |
| **SIGNATURE – CHAIRMAN**  |  |