



HYDRO ATTENDANCE LOG

NAME OF PERSON/ORGANISATION/HOST _____

NUMBER OF PARTICIPANTS Parent/Client Adults(18+)/Staff _____ Client Children _____

DATE OF ATTENDANCE: _____ DAY (I.E. MON, THURS ETC) _____

TIME IN _____ TIME OUT _____

IF MULTIPLE DAYS & TIMES REQUIRED A SEPARATE LOG FOR EACH DIFFERENT ATTENDANCE DAY/DATE MUST BE COMPLETED FOR EACH VISIT (THIS CAN BE FORWARDED TO US UP TO THE DAY BEFORE)

PLEASE NOTE WE HAVE A CONTRA INDICATIONS CHECKLIST WHICH MUST BE COMPLETED ON YOUR ARRIVAL & WILL DETERMINE IF THE HYDRO IS ACCESSIBLE OR NOT (COPY ATTACHED)

NAME OF PARENT/CLIENT/STAFF ACTUALLY IN THE HYDRO POOL	PARENT CLIENT STAFF FAMILY	NAME OF POOL SIDER/SPECTATOR IN THE POOL AREA BUT NOT IN THE POOL	POOL SIDER OR SPECTATOR
I.E JOE BLOGGS	Parent	I.E. JADE JONES	Pool Sider
I.E. SARAH BLOGGS	Client	I.E. GLADIS BLOGGS	Spectator

