

# Amberley Pool

## Activity Interest Survey

Your Contact details:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

email: \_\_\_\_\_

(Please circle one) - Adult / Child

### Are you interested in:

<input type="checkbox"/>	Adult aqua-aerobics	Once a week
		Twice a week

<input type="checkbox"/>	Adult lane swimming	Once a week
		Twice a week

<input type="checkbox"/>	Allcomers time trials: All four strokes, 1 & 2 lengths timed & recorded	Weekly
		Fortnightly

***Come back to beat your time***

Childrens aqua-aerobics (when small pool is open)

### What days would suit you? (Please circle preferred days)

M	T	W	T	F	S	S
No preference - weekday				No preference - weekend		

### What times would suit you? (Please tick preferred times)

5.30 - 7.00 am - This time is for lane swimming only

<input type="checkbox"/>	12.30 - 1.30pm	<input type="checkbox"/>	2.30 - 3.30pm	<input type="checkbox"/>	4.30 - 5.30pm	<input type="checkbox"/>	7-8pm
<input type="checkbox"/>	1.30 - 2.30pm	<input type="checkbox"/>	3.30 - 4.30pm	<input type="checkbox"/>	6-7pm	<input type="checkbox"/>	8-9pm

Is your interest in any of these activities simply casual or would you sign up to a pre-paid 5 week commitment.  Casual  5 week Block

Before we consider introducing these activities we need to gauge their potential viability.

We need your input to help us determine the kinds of activities that you would be interested in and will support.

For further information please contact:  
Lisa Goldsbury  
03 3148816

Please return completed forms to Lisa by **30 November 2017**

Hurunui District Council Office, Amberley Pool Office

or email: [lisa.goldsbury@hurunui.govt.nz](mailto:lisa.goldsbury@hurunui.govt.nz)