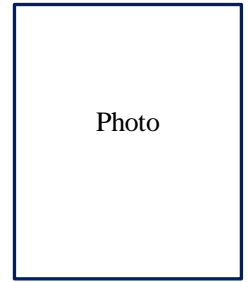




**UNIVERSITY OF CALICUT  
DEPARTMENT OF PHYSICAL EDUCATION**



**AQUATIC COMPLEX  
SWIMMING SUMMER COACHING CAMP 2026  
( Age Limit 6 years - 17 years, Minimum Height 4 Feet )**

Phone: 9567945527/ 9961690270

1	Name (Capital Letters)	
2	Address and Tel. No.	
3	Date of Birth, Age & Sex	
4	Name of Guardian/Parent	
5	Jersey / T-shirt Size	
6	Whether the swimmer is suffering from any contagious disease, epilepsy etc.	<i>Yes or No</i>

**DECLARATION**

I ..... do hereby declare that the above particulars are true and correct to the best of my knowledge and belief. I will abide by the rules and regulations of the Aquatic Complex, University of Calicut.

Place :

Signature of the Applicant/ Parent

Date :

**For Office use only**

- 1. Validity of the pass : 22 days
- 2. Approved/Not approved. :

Signature of the Section i/c

## **GENERAL RULES AND REGULATIONS FOR THE USE OF THE SWIMMING POOL**

1. Entry of the pool will made only with ticket/pass
2. Swimmers may use the pool at their own risk. University is not responsible for any theft accident injury and loss of life occurring in the Swimming Pool and premises.
3. Those who do not know proper swimming, should not use the competition pool .
4. Swimmers should bring proper swimming dress in hand and wear if only after checking by the concerned official.
5. Using white /transparent costumes is strictly prohibited.
6. Swimmer must wear swimming caps.
7. Use of oil, soaps etc. is strictly prohibited.
8. Those who have contagious disease, heart disease, epilepsy and like diseases should not use the pool.
9. Intoxicated persons are not allowed to use the pool and consumption of alcohol is strictly Prohibited in the pool premises.
10. Eatables should not be brought inside the pool.
11. Spitting and passing of urine in the pool is strictly prohibited.
12. Use of Electronic gadgets, unauthorized photography are strictly prohibited.
13. Take bath before entering in the pool.
14. Swimmers those who practice competition pool only in the presence of qualified Coaches in the training session.
15. Unnecessary jumping from the deck area is strictly prohibited.
16. Use of the foot wears in the deck area is strictly prohibited.
17. Keep the pool and its surroundings clean and tidy.
18. No one else other than the coaches appointed by the University is permitted to teach Swimming within our facilities.
19. Mobile phone/any kind of camera inside the Aquatic Complex is prohibited.
20. Minimum height of pool users have to be 3.5 feet.
21. The Pool will be closed on all the Sundays for maintenance.
22. Users of the pool should follow the instruction of the staff on duty.
23. Any person violates the rules shall be send out without any refund of fees.
24. Working time of the Swimming Pool :

**DIRECTOR,**

**Department of Physical Education**

### **DECLARATION**

I, .....have read and understood the above rules. I do hereby undertake that all injuries/loss of life sustained by me/my above ward/trainee due to accident during training/competition will be at my risk and responsibility and also I undertake that I/ my above ward will abide by all the rules and regulations stated above.

Signature of the Applicant/Parent

**CONSENT LETTER**

I, Mr./Mrs./Ms.....,  
son/daughter/wife/husband of .....  
residing at.....,

hereby confirm that, I have read the rules and regulations of the Calicut University Swimming Pool, and I am aware of the rules and regulations to be followed by me in the Swimming Pool. I am also aware that the rules and regulations are for my own benefit and improvement.

I hereby declare that:

1. I do not have a history of any serious medical conditions such as seizures (fits) heart failure, asthma, etc.
2. I am solely responsible for my actions inside the Swimming Pool premises.
3. The Management shall not be held responsible in the event of any mishap due to my negligence/ non-compliance with the Swimming Pool rules in the Swimming Pool premises.

I understand that if I fail to comply with the terms, I will be liable for suitable action as per the rules and regulations. I understand that I will strictly follow the rules and regulations of the University Swimming Pool.

**Signature of the Student**

I fully endorse the above undertaking being signed by my son/ daughter/ husband/ wife for using the Swimming Pool at University premises. I also ensure that he/ she complies with the stipulated rules of the Swimming Pool.

Place:  
Date:

**Signature of the Parent**



**UNIVERSITY OF CALICUT  
DEPARTMENT OF PHYSICAL EDUCATION**

# **SWIMMING SUMMER COACHING CAMP**

**APRIL & MAY 2026**

## **FEE DETAILS**

[www.uoc.ac.in](http://www.uoc.ac.in)



**E-PAYMENT**



**INSTANT PAY**



**PURPOSE**

- 1. Rs.2250/- (DPE005-Swimming Pool Monthly Coaching Fee)**
- 2. Rs. 405/- (GST001-Goods and Services Tax)**

## **DOCUMENTS REQUIRED**

- 1. Application Form  
( Available at Aquatic Complex Office)**
- 2. Aadhaar Card Copy -1**
- 3. Photo – 2 Nos**
- 4. Challan Copy - 2**

**Swimming Suit/ Tighter, Swimming Cap &  
Swimming Goggles are mandatory**

**For More Information:**

**9567945527 , 9961690270, 9447862698, 9746556122**

**BOOK YOUR SLOT NOW**