

Resident Activity Group

Group _____ Dates at Centre _____

Group 1			NS	M	B	Group 2			NS	M	B
Activity	am	pm				Activity	am	pm			
1						1					
2						2					
3						3					
4						4					
5						5					
6						6					
Staff						Staff					

Group 3			NS	M	B	Group 4			NS	M	B
Activity	am	pm				Activity	am	pm			
1						1					
2						2					
3						3					
4						4					
5						5					
6						6					
Staff						Staff					

Group 5			NS	M	B	Group 6			NS	M	B
Activity	am	pm				Activity	am	pm			
1						1					
2						2					
3						3					
4						4					
5						5					
6						6					
Staff						Staff					

NS = Non/weak swimmer

M = Medical condition

B = Behavioural Issues

Any amendments to group details must be made prior to commencement of activity sessions.

