



SWIMMING SOUTH AFRICA

Web Site: www.swimsa.org

LTS LOG SHEET

LOGGERS' NAME: _____ TELEPHONE NUMBER: _____

PHYSICAL ADDRESS: _____ COURSE ORDER NO: _____

This document must be fully completed by the mentor

Mentor's Name & Surname	Affiliates Reg. No:	Date of Logging	Hours Logged	Mentor's Signature	Lesson details-activities performed by the instructor
	<u>I/</u>				

Logger's Signature: _____ Date: _____ PE&TC Signature: _____ Date: _____

Note: This must be done with at least 2 different qualified and registered instructors. The instructor must have at least 2 years LTS teaching experience before they may accept loggers.