

MEMBERSHIP FORM

Section A - Members Details (Please Print)

Swimmers Name: _____
Home Address: _____ _____
Home Telephone: _____
Date of Birth: (DD/MM/YYYY) _____ <input type="checkbox"/> Male <input type="checkbox"/> Female

Section B - Emergency Contact Details (Two emergency contact details should be provided)

Name: _____	Relationship _____
Home Telephone: _____	Mobile: _____
Email Address: _____	

Name: _____	Relationship _____
Home Telephone: _____	Mobile: _____
Email Address: _____	

Section C - Personal Details

Are there any medical conditions/special needs which the club should be aware of e.g. allergies, epilepsy, diabetes, asthma? Any regular medications (please state):
Ethnic background: (See Codes in completing membership section)
Are you a member of another swimming club? Yes/No If yes which one?
Have you any relevant disability? Yes/No If yes please give details? If yes do you have an ASA Disability Classification? Yes/No

Section D - Payment Details

Standing Order Account Name: _____
Payment would be appreciated between the 1st and 8th of every month.

I agree that the information given here and any subsequently provided or collected, may be held on computer and provided to third parties only in pursuance of the legitimate activities of Linslade Crusaders Swimming Club and those of the Amateur Swimming Association. Linslade Crusaders Swimming Club operates a Code of Conduct for all its members (Swimmers, Coaches, Teachers, Parents, Officials & Volunteers) details of which can be found on our club website. I acknowledge receipt of the rules of the club and confirm my understanding and acceptance that such rules(as amended from time to time)shall govern my membership of the club. I further acknowledge and accept the responsibilities of membership upon members as set out in these rules. From time to time the club will authorise publicity or promotional photographs of swimmers.

If you do not wish your child to be included in any of these, please tick here.

Signature.....

Date.....

To be signed by Parent/Guardian for members under 18.

