North Tyneside Amateur Swimming Club Membership Application

(Notes to assist with the completion of this form are attached as Appendix 1)

Personal Information:						
Surname:			Forename:			
Title:			DOB:			
Address:						
Postcode:						
Contact Information:						
Name of persons accompanying child swimmer			Relationship to swimmer			
Telephone No:			Mobile No:			
E-mail address						
Alternate contact for use in emergency:						
Name:			Contact No:			
Relationship to swimmer:						
Membership category:						
Type of membership please tick one)			ppment	Associate		
Membership of any other club: Name of club		ASA nu	umber:			

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Medical information – requires completion only by swimmers.

Any information given here will be shared with the coach / teacher responsible for your child's training but will otherwise be treated in complete confidence and not disclosed to other club members.

If a swimmer has any disability that may impact on their ability to carry out the training and development work set by their coach or teacher (e.g. a physical or learning disability, visual or hearing impairment) or if they suffer from any medical condition (e.g. Asthma) or have any allergies that require regular medical treatment or medication please give the deta ils below, including any medication taken.

	Name of Swimmer:	
	Details of medical condition:	
	Any other information required by coach on poolside.	
Decla	aration:	
gove (Whe	rning my membership as are stated in the 'C ere the applicant is under 16 years of age, a p	Swimming Club and declare that I have read and accept the rules lub Constitution' and 'Code of Conduct'. Sparent/guardian should sign on their behalf and state their name lians are welcome to become members of the club by completing a
Signa	ature of Applicant	Date:
	tionship to Applicant re form signed by another on their behalf)	

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Notes for completion

Personal Details:

Your personal details are covered by the Data Protection Act and will be used solely for the purpose of maintaining club records and will not be disclosed to any other organisation (other than the ASA for insurance purposes). The ASA requires ALL club members (including Associate members) to provide their name, address and date of birth for insurance purposes. If this information is not given we cannot accept your application. Please include an email address if you have one as most communications issued by the club are sent by email.

Contact Details:

We also need an alternative emergency contact, this could be the other parent/guardian, another relative or someone you rely on to look after your child and you can give us either a landline or mobile, but please let this person know in case we have to contact them.

Membership Category:

There are 3 categories of membership:

- Competitive refers to swimmers aged 9yrs/over who have reached the standard to take part in ASA event;
- Development refers to swimmers under 9yrs or those who are over 9 but not yet ready to take part in competition:
- Associate refers to parent members, coaches, teachers & volunteers who support the clubs aims but who do not swim.

Membership of other clubs:

Please let us know if you are already a member of another swimming club and if you are registered with the ASA. We can then make sure your registration is updated and you only have to pay one registration fee. We are also keen to know of any adult members with teaching/coaching qualifications or who are qualified swimming officials as this helps us to plan future events and offer training opportunities to members.

Medical Information:

It is essential for teachers/coaches to be made aware of any medical condition or disability your child has that could affect their performance in training or competition and of any medication that your child uses on a regular basis. It is also a good idea to make the teacher/coach aware of any occasional medication e.g. antibiotics, as these can also affect performance. Problems with eating/sleeping or if the swimmers is having any emotional problems can also affect performance so it may be useful to advise the coach/teacher. All such matters can be discussed in confidence.

Competitive swimmers who suffer from asthma and who have regular medication/inhalers are required to register these details with the ASA. The membership secretary will provide you with the necessary form and this must be renewed annually or if the medication changes.