

MORPETH AMATEUR SWIMMING CLUB**MEMBERSHIP APPLICATION FORM – 2017****Name:****Address:****Phone:****Mobile:****E mail:****Date of Birth:****Male / Female****CATEGORY OF MEMBERSHIP** **Swimming** **Administrator** **Coach / Teacher / Official** **Volunteer** **Supporter****SQUAD****MONTHLY FEE** **Minnow** **£ 12.00** **Development** **£ 17.00** **B** **£ 21.00** **A** **£ 25.00** **AA** **£ 31.00** **AB** **£ 25.00** **Adult** **£ 15.00****ANNUAL ASA FEES****(these are an annual one off payment)** **Category 1** **£17.00****(non-competitive swimmers)** **Category 2** **£34.00****(Competitive swimmers)** **Category 3** **£12.50****(non-swimmer/administrator)****DIRECT DEBIT DETAILS****Barclays Bank – Morpeth Division****Account Name:** Morpeth ASC**Account Number:** 10648671**Sort Code:** 20-58-17**Reference:** (members surname/initial)

Please provide 3 emergency contact numbers (including at least 1 mobile no.) for use during training sessions and any competitions where swimmers are not accompanied by parents/guardians.

1. Contact in case of emergency**Name:****Address:****Relationship:****Tel No:****2. Contact in case of emergency****Name:****Address:****Relationship:****Tel No:****3. Contact in case of emergency****Name:****Address:****Relationship:****Tel No:****Regular medication (if none, please state):****Allergies (if none, please state):****Doctor's name:****Address:****Tel No:****Further notes to aid your / your child's safety and development (e.g.medical history):**

<p>Do you consider yourself to have a long standing illness, disability or infirmity which limits your daily activities in any way?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Nature of Disability (please select):</p> <p><input type="checkbox"/> Visual impairment <input type="checkbox"/> Hearing Impairment <input type="checkbox"/> Physical impairment <input type="checkbox"/> Learning difficulty <input type="checkbox"/> Multi Impairment <input type="checkbox"/> Health <input type="checkbox"/> Other</p>	<p>ETHNIC ORIGIN (please select):</p> <p><input type="checkbox"/> White – British <input type="checkbox"/> White – Irish <input type="checkbox"/> Mixed – White and Black Caribbean <input type="checkbox"/> Mixed – White and Black African <input type="checkbox"/> Mixed – White and Asian <input type="checkbox"/> Asian and Asian British – Indian <input type="checkbox"/> Asian and Asian British – Pakistani <input type="checkbox"/> Asian and Asian British – Bangladeshi <input type="checkbox"/> Black and Black British – Caribbean <input type="checkbox"/> Black and Black British – African <input type="checkbox"/> Chinese <input type="checkbox"/> Other (specify)</p>	<p>OFFERS (please tick as appropriate)</p> <p><input type="checkbox"/> No thank you, I don't want British Swimming/the ASA to send me details of products and services <input type="checkbox"/> No thank you, I don't want British Swimming/the ASA to send me details of events <input type="checkbox"/> No thank you, I don't want British Swimming/the ASA to send me details from British Swimming/the ASA commercial partners <input type="checkbox"/> If you do not want details of your achievements to be visible on the British Swimming Website, please tick here Caution! If you hide your details they will not be visible on the Rankings Database which may affect your ability to enter events</p>
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Please read and sign the declarations below. It is essential that swimmers and parents/carers sign to confirm that they agree to abide by the relevant code of conduct. Swimmers (and parents/guardians of under 18s) are also signing to acknowledge that they accept the club rules. These documents are available to view on the website or by request at the pool.

- I consent / do not consent (*delete as appropriate*) to the member being the subject of photography or video photography for promotional, media or coaching purposes whilst a member of Morpeth ASC. Any photography will be carried out in line with the ASA child protection guidelines.
- I consent to any emergency treatment necessary during the running of the Club. I authorise the poolside staff/committee to sign any written form of consent required by hospital authorities if delay in getting my signature is considered by the doctor/dentist to endanger my child's health and safety.
- I consent / do not consent (*delete as appropriate*) to the member attending organised galas and venues away from Morpeth, and to the use of club organised transport whilst a member of Morpeth ASC.
- I verify that I have read and understood the club codes of conduct and I am willing to abide by their references.
- 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.

I hereby apply for membership of Morpeth ASC.

Signed	Signed	Date
(Swimmer if over 14 years)	(Parent/guardian if under 18)	

Would you/your parent be prepared to become a volunteer helper?

Yes
 No

The Club shall not refuse an application for membership on discriminatory grounds, whether in relation to ethnic origin, age, sex, religion, disability, political persuasion or sexual orientation. All data collected on this membership form will be kept securely by club personnel and medical/disability information will be provided to teachers/coaches on a need to know basis. If at any time any of the above details change please contact the membership secretary.