

MID SUSSEX MARLINS Swimming Club Ltd APPLICATION FORM – JUNIOR SWIMMER PLEASE COMPLETE IN BLOCK CAPITALS		OFFICE USE	
		Date Started:	
		Account No:	
		Section:	
		ASA Number	
Swimmer's Details:	Full Name:		
Preferred name:		Date of Birth:	Sex (M/F):
If a member of another ASA swimming club:		ASA Number	
Name of Club:		Will you resign?	Y / N
Please specify any relevant health problems (including sight & hearing):			
Medication:			
First Parent/Guardian name			
Address:		Home Tel:	
		Work Tel:	
Postcode:		Mobile:	
Email (required):			
All Club information/contact emails will be sent to this given email unless otherwise stated THIS WILL INCLUDE BILLING INFORMATION			
Second Parent/Guardian name:			
Address :		Home Tel:	
Same as above? <input type="checkbox"/>		Work Tel:	
Please tick box		Mobile:	
Email:			
If second parent/guardian would like contact emails too, please tick here <input type="checkbox"/>			
<p>Once accepted, on behalf of my child, I agree to all the following:</p> <ul style="list-style-type: none"> To pay all club fees, in full and on time. I understand that I may not swim in a club session until all fees due, are paid in full; All fees will be paid, one month in advance by monthly Direct Debit; Fees may be adjusted by the club, at any time and at least annually on the 1st October and that fees are non-refundable; If they do not swim for six consecutive weeks and we have not contacted the club, it can be assumed that my child has resigned from the club and their place can be taken by another child. Fees will be due. <p>Resignation - I will give 4 weeks written notice, of my child leaving and pay in full, all fees due, up to the date of leaving. Club Secretary, membership secretary and squad coach to be notified.</p> <p>I agree that I and my child will abide by the rules of Mid Sussex Marlins Swimming Club Ltd (as shown on the clubs website) 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 and parents as set out in these rules and the Parent Code of Conduct Form I have received.</p> <p>I consent to the use of my personal information, including sensitive personal data about health, for the purposes and on the terms set out by British Swimming. I also accept that the above information, together with information relating to swimming performance details, shall be kept and maintained on the Club computer database and that details of my swimming achievements may be published to the internet and linked to our social media site. See note below.</p>			
.....DATE.....		NAME.....	
Signed (parent or guardian if under 18)		Printed	
Please note the club will take photographs from time to time for squad and club news and information will be published on the Club website and linked to our designated social media site. Photographs will not be tagged, but names may be written in the accompanying article.			
If you do not want your child photographed or mentioned, please tick here <input type="checkbox"/>			
If this member is under 18 years of age and you do NOT give permission to the club to use a video camera to assist in this member's training please tick this box <input type="checkbox"/>			