## **Confirmation of Commitment**

Swimmer Name	Date of Birth
rights at any General Meetings of the Clu membership of one parent/carer. The de swimmer and if the swimmer is under 18	vimming Club who are under 18 years of age do not have voting ub, the membership fee for those swimmers includes the eclaration at the bottom of this form should be signed by the 3 years, by the parent/carer, whose signature legally confirms the erson who will also be deemed a Supporter Member of the Club
Name of Supporter Member	Address (if different from swimmer)
	ogether with the ASA membership Forms described above. In call we an alternative name, address and telephone contact details
not those included on the ASA Registrat	tion Form) i.e. another family member or a friend, who can be
(not those included on the ASA Registrat contacted should parents/guardians not Contact Name(s), Address and Telephon include any mobile numbers which may	tion Form) i.e. another family member or a friend, who can be be available.  Relationship to member
(not those included on the ASA Registrat contacted should parents/guardians not Contact Name(s), Address and Telephon include any mobile numbers which may	tion Form) i.e. another family member or a friend, who can be be available.  Relationship to member
(not those included on the ASA Registraticontacted should parents/guardians not Contact Name(s), Address and Telephone include any mobile numbers which may be mergency.  I acknowledge receipt of the rules of New understanding and acceptance that such membership of the Club. I further acknowledge acknowledge receipt of the rules of New understanding and acceptance that such membership of the Club. I further acknowledge receipt of the rules of New understanding and acceptance that such membership of the Club. I further acknowledge receipt of the rules of New understanding and acceptance that such membership of the Club. I further acknowledge receipt of the rules of New understanding and acceptance that such membership of the Club. I further acknowledge receipt of the rules of New understanding and acceptance that such members which we will be a supplicated which we will be a supplicated which we will be a supplicated which will	tion Form) i.e. another family member or a friend, who can be be available.  Relationship to member
(not those included on the ASA Registratic contacted should parents/guardians not Contact Name(s), Address and Telephone include any mobile numbers which may emergency.  I acknowledge receipt of the rules of New understanding and acceptance that such membership of the Club. I further acknowledge as set out in these rules.  I understand that, in compliance with the this information is accurate, kept up to depurpose and activities of the Club. Informative Club. The information will be disclose	wquay Cormorants Swimming Club and confirm my rules (as amended from time to time) shall govern my