

Newquay Cormorants Amateur Swimming Club

Application Form for Members under 18 years of age

Applicant's Details

Surname: _____

First Name(s): _____

Date of Birth: _____

Address: _____

Parent/Guardian Details

Surname: _____

Surname: _____

First Name(s): _____

First Name(s): _____

Address (If different from above): _____

Address (If different from above): _____

Contact Details

Phone number: _____

Phone number: _____

Mobile number: _____

Mobile number: _____

Email: _____

Email: _____

Please also complete and sign the following forms included (where relevant).

1. The club confirmation of commitment form and additional emergency information form
2. The medical form
3. Photography consent form
4. The swimmers' Code of Conduct
5. Parents'/Guardians' Code of Conduct
6. Parents'/Guardians' welcome letter
7. Swimmers' welcome letter

Signed: _____

Dated: _____

Medical Information Form

Swimmer Name	Date of Birth

To be completed by members 18 years or over, or by parents/guardians of swimmers under 18 years. Please delete Yes or No as appropriate and complete further details as necessary.

Do you or does your child have any specific medical conditions requiring medical treatment and/or medication? Yes/No	If yes, please give details
Do you or does your child have any allergies? Yes/No	If yes, please give details
Do you or does your child take any regular medication? Yes/No	If yes, please give details
Any other relevant information	

I understand that, in compliance with the Data Protection Act 1998, all efforts will be made to ensure that this information is accurate, kept up to date and secure and that it is used only in connection with the purpose and activities of the club. Information will not be kept once a person is no longer a member of the club. The information will be disclosed only to those members of the club for whom it is appropriate and relevant officers of the Amateur Swimming Association or British Swimming.

Signed (Swimmer): _____ Date: _____

Signature of Parent/Guardian (if the swimmer is under 18 years): _____

For Parents/Guardians of swimmers under 18 years

It may be essential at some time for the Club Coach or Team Manager accompanying your child to have the necessary authority to obtain any urgent treatment which may be required whilst at a competition with Newquay Cormorants Amateur Swimming Club. Would you therefore please complete the details on this form and sign below to give your consent.

I, _____ being the parent/guardian of the above named child hereby give permission for the Coach or Team Manager to give the immediately necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son/daughter's interest, in the doctors medical opinion, for any delay to be incurred by seeking my personal consent.

Signature of Consent by Parent/Guardian: _____

Print Full Name: _____ Date _____

Parents Photography Consent Form

Note: this form must be read and completed after reading the ASA/Newquay Cormorants Amateur Swimming club photography policy

The Newquay Cormorants Amateur Swimming Club may wish to take photographs, (individual and in groups) of swimmers under the age of 18 that may include your child during their membership of the club.

All photos will be taken and published in line with ASA policy. The Newquay Cormorants Amateur Swimming Club requires consent to take and use photographs.

Parents/Guardians have a right to refuse agreement to their child being photographed.

As the parent/guardian of _____ please complete the form below in respect of your child. Please note you can withdraw your consent in writing to the club Welfare Officer at any time should you wish to.

- Take photographs to use on the club's secure website
Consent given/Consent refused*
- Take photographs to include with newspaper articles
Consent given/Consent refused*
- Take photographs to use on club notice boards
Consent given/Consent refused*
- Video for training purposes only
Consent given/Consent refused*
- Employ a professional photographer (suitably approved) who will take photos in competitions attended
Consent given/Consent refused*

*Delete as appropriate

Signed: _____

Dated: _____

Confirmation of Commitment

Swimmer Name	Date of Birth

As members of Newquay Cormorants Amateur Swimming Club who are under 18 years of age do not have voting rights at any General Meetings of the Club, the membership fee for those swimmers includes the membership of one parent/carer. The declaration at the bottom of this form should be signed by the swimmer and if the swimmer is under 18 years, by the parent/carer, whose signature legally confirms the commitment of the swimmer, and the person who will also be deemed a Supporter Member of the Club.

Name of Supporter Member	Address (if different from swimmer)

Additional Emergency Contact Information

This information should be completed together with the ASA membership Forms described above. In case of any emergency, please complete below an alternative name, address and telephone contact details (not those included on the ASA Registration Form) i.e. another family member or a friend, who can be contacted should parents/guardians not be available.

Contact Name(s), Address and Telephone Number(s) please include any mobile numbers which may be used in an emergency.	Relationship to member

I acknowledge receipt of the Club Rules and Codes of Conduct of Newquay Cormorants Amateur Swimming Club and confirm my understanding and acceptance that such rules and codes of conduct (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 and codes.

I understand that, in compliance with the Data Protection Act 1998, all efforts will be made to ensure that this information is accurate, kept up to date and secure and that it is used only in connection with the purpose and activities of the Club. Information will not be kept once a person is no longer a member of the Club. The information will be disclosed only to those members of the Club for whom it is appropriate and relevant officers of the Amateur Swimming Association or British Swimming.

Swimmer Signature: _____ Date: _____

Parent/Guardian Supporter Member Signature: _____