

MEMBERSHIP FORM

Please complete the details below and return by email or post the forms in the black post box at Tring Sportspace

Swimmer Details

Name	Gender	M/F	DOB	
Address				
Email Address*			Date joined	
Which Swim Squad are you joining: Squad 1 / Squad 2 / Squad 3 / Masters & Fitness				
ASA number (are you joining from another club / wish to have joint membership with another club):				
Please give details of medical conditions/allergies/regular medication				
Disability details, please give details of disability				

Emergency Contact Details (please provide at least one mobile number)

Name	Tel	
Name	Tel	

Parent/Carer Details (if swimmer is under 18)

Name	
Address (if different)	

- The Club may take photographs of swimmers for use for example, on the website, newspapers and training. Photographs will be taken and published in line with the ASA Photography Policy. Parents/swimmers have a right to refuse consent and withdraw consent in writing to the club Welfare Officer at any time. **I agree/I do not agree** (delete as appropriate) to TSC taking and using photographs of me/my child as above

Signature Date.....

- I acknowledge the rules of Tring Swimming Club, as stated on the club website (www.tringswimmingclub.co.uk) 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

Signature (member).....Signature (parent/carers).....

- Please give permission in an emergency situation for the Coach or Team Manager or authorised person to give **immediate necessary medical or surgical treatment** as directed by medical authorities. Parent to sign for under 18s

Signature Date.....

*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 at tringswimmingclub@gmail.com immediately