PRESCOT SWIMMING CLUB APPLICATION FOR MEMBERSHIP YEAR 2016

NAME	FOR OFFICIAL USE ONLY
	MEMBERSHIP NO
ADDRESS	DATE RECEIVED
	MEMBERSHIP CATEGORY
POST CODE	☐ Senior member ☐ ASA Cat
TEL NO (HOME)	☐ Junior member ☐ 2 ☐ 2 ☐ 3
(MOBILE)	☐ Honorary member ☐ ☐ Life member
E-MAIL	Fee Due
D.O.B. ETHNIC ORIGIN	Signed
MALE FEMALE	
NEW MEMBER YES □ NO □ Membership No	
MEDICAL INFORMATION (In the interests of discipline and safety, please let your child's instructor know of any medical conditions we should be aware of and list conditions.)	
Please disclose any disability	
If you are a member of any other Club, please list below stating date of joining	
TO BE COMPLETED BY PARENT/GUARDIAN OF SWIMMER	
NAME	
ADDRESS (if different from above)	
E-mail address	
Telephone number (home) (mob)	
CONDITIONS OF MEMBERSHIP TO PRESCOT SWIMMI 1. I will inform the Club Secretary immediately of any change club/s to which I belong. 2. Membership to be paid in full by stipulated date of the Mana 3. Lane caps must be worn at all training sessions. 4. Club caps must be worn at all galas. 5. All swimmers will be expected to enter Club Championships 6. I declare that the above information is correct and that I have the Club and agree to abide by them and any decision of the	gement Committee. s. e read the rules, Code of Conduct of
Signature of Swimmer	