## **BRIDGWATER AMATEUR SWIMMING CLUB** Membership Form - PARENT / VOLUNTEER



Surname:		First Names:	
Da	te of Birth:	Ge	nder: M / F
Na	nme(s) of child/ren swimming with the club:		
En			
Tel	Telephone no:		2 <sup>nd</sup> Telephone no: (Emergency contact no)
Ad	Address:		
Po	Postcode:		
Our Data Protection:			
Standa specific		exac hbrid://brid	and clubs associated with the Club. Please read our city how we will handle your data and has links to our gwaterswim.co.uk/documents/
	I have read the privacy policy referred to above and consent to the processing of the my data as outlined in that policy.		
	I consent for my email as given above to be the main form of communication from the club. We will send useful information, including our newsletters, information about membership, events, products and relating to swimming events or information which you have requested from us.		
	I consent to the processing of special category personal data on the basis of reasons outlined in our privacy notices (health and safety of members, safety during trips/galas).		
	I consent for my/my child's image or a video of me/my child to be used in promotion of the club, in news articles and on the closed Facebook site (Bridgwater Swim)		
I ackno	ance that such rules (as amended from tim	ne to t	codes of conduct and confirm my understanding and ime) shall govern my membership of the Club. I further ship upon members as set out in these rules.
Signed:			Date:
Many o	of the activities of the club rely on volunt	eers.	If you would be willing to volunteer a little time,

please indicate below how you could help. Poolside teaching / Helping at competitions / Helping with fundraising events / Helping with taking the register on club nights / Sitting on the committee