

**BRIDGWATER AMATEUR SWIMMING CLUB
MEMBERSHIP APPLICATION FORM 2018**



Surname:	First Names:
Date of Birth:	Gender: M / F
Parent's Name (if under 18):	
E mail address:	
Telephone no:	2nd emergency contact name and telephone number
Address:	
Postcode:	
Health: Please give details of any Health Problems or Disabilities: e.g. Asthma, hearing, eye sight or any other disability. Disabled Category:	

Our Data Protection:

The information given above will be kept on computer and in paper and digital format for BASC administration purposes and also passed to those governing bodies and clubs associated with the Club. Please read our Standard External Privacy Policy which explains exactly how we will handle your data and has links to our specific members / volunteer privacy notices - <http://bridgwaterswim.co.uk/documents/>

Please tick below to give consent as appropriate

- 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 (Bridgewater Swim)

Club rules and Codes of Conduct:

I acknowledge receipt of the rules of the club and codes of conduct 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.

Signed: Date:
(Signature of Parent if member under 18)

**Please return completed forms to: Katy Coate, 1 Stowey Cottages, St Marys Street,
Nether Stowey, TA5 1LJ
By email: kcoate@btinternet.com
Or by hand: to a committee member**