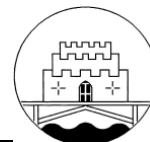


**BRIDGWATER AMATEUR SWIMMING CLUB  
MEMBERSHIP APPLICATION FORM**



<b>Surname:</b>	<b>First Names:</b>
<b>Date of Birth:</b>	<b>Gender: M / F</b>
<b>Parent's Name (if under 18):</b>	
<b>E mail address:</b>	
<b>Telephone no:</b>	<b>2<sup>nd</sup> emergency contact name and telephone number</b>
<b>Address:</b>	
<b>Postcode:</b>	
<b>Swim Squad:</b>	<b>Pre-squad / Junior link / Junior / Squad link / Squad / Performance link / Performance</b> <span style="float: right;"><b>Delete as appropriate</b></span>
<b>Health: Please give details of any Health Problems or Disabilities: e.g. Asthma, hearing, eyesight or any other disability.</b> 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 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)

**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. Please refer to the club website (<http://bridgwaterswim.co.uk/forms-documents/>) for codes of conduct.*

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

For parents/carers of members under 18 years, it may be essential at some time for the coach or team manager accompanying your son/daughter to have the necessary authority to obtain any urgent treatment which may be required whilst at a competition or event. Would you therefore please complete the details on this form and sign below to give your consent.

I,..... being the parent/carer 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 doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

Signature of consent by parent/carer: .....

Print full name:.....

Date: .....

**Please return completed forms to: Heather Prothero, 34 Blakes Rd, Wembdon, TA6 7RS  
By email: [hprothero@hotmail.co.uk](mailto:hprothero@hotmail.co.uk)  
Or by hand: to a committee member**