SWIMMING NSW LTD.



MEMBERSHIP FORM



CLUB:	SEAS	ON:				
☐ Renewal ☐ New Member ☐	□ Upgrade □ Tra	nsfer (Previous	Club)		
PERSONAL INFORMATION (*compulsory information)						
ID Number	Last I	lame*				
First Name*	Middl	e Name or Initial				
Gender* □ Male □	Female Date	of Birth*/		dd/mm/yyyy		
Australian Citizen* □Yes □] No					
CONTACT INFORMATION (the privacy information and declaration overleaf must be signed)						
Address*						
Suburb*	State		_Postcode*_			
Telephone: (Please tick preferred	d number, at least 1	number must be	e provided)			
□ Home () □ Work ()				_		
□ Mobile						
Email Address						
I would like to receive: ☐ NSW Swimming e-newsletters ☐ Australian Swimming e-newsletters						
EMERGENCY CONTACT INFORMATION						
Last Name*	First Name* _		_Relationshi	p*		
Telephone: Home ()	Work	()				
Mohile		*at least 1 nu	mhar must h	nrovided		

Please continue on next page

Please note: Swimming NSW collects membership information in accordance with the Australian Swimming Privacy Policy. Information on this and other policies is available at www.nswswimming.com.au

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MEMBERSHIP DETAILS (only 1 must	be selected)					
☐ Swimmer ☐ Non-Swimmer Note: A swimmer is defined as someone A non-swimmer is defined as someone	•	•				
OTHER INFORMATION (more than 1	may be selected)					
□ Coach ASCTA No.	☐ Official	☐ Administrator	☐ Learn-to-Swim			
☐ Asthmatic ☐ Non-English Spe	aking Background	☐ Indigenous Member				
☐ Swimmer with a Disability	Classification (if app	plicable)				
	DECLARATI	ON				
1. I agree to abide by the rules, regulations and policies of Swimming NSW, Swimming Australia, the						
relevant District Swimming Association and the relevant club, including Swimming Australia Anti-						
Doping, Member Protection and Privacy Policies (these are available at <u>www.swimming.org.au</u>).						
2. I authorise Swimming NSW to use	e and disclose, to rela	ted and relevant bodie	es any of my personal			
information that may be necessary to implement the rules, regulations and policies in 1 above. I agree						
to have my name, photograph and results published in official programs, newsletters and websites.						
Signature (Member):		Date:	ll			
If Under 18 Name of Parent/Guardian	:					
Signature (Parent/Guardian):		Dato				
Signature (Parent/Guardian):		Date	<i></i>			
Other Information Required by Club:						

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