

# Mildenhall & District Swimming Club Membership 2014



Please fill in the form below and sign the declaration.

This form along with the annual membership fee should be returned at the beginning of the year.

I agree that photographs can be taken for use in publicity material for Mildenhall and District Swimming Club. Yes / No

**Note.** If any swimmer has any medical condition or disability that you feel it beneficial to notify the Club Coach please give brief details in the appropriate box below, continuing onto another sheet of paper, if needed.

Family Details		Clu	ub Reference	CLUB-REF
Main Contact Title	Main Contact Forename	Main Contact Surname		
TITLE-MAIN	FORENAME-MAIN	SURNAME-MAIN		
Address:				
ADDRESS-LINE-1				
ADDRESS-LINE-2				
ADDRESS-LINE-3				
Post Town:		County:		
POST-TOWN		COUNTY		
Post Code	Home Phone	Mobile Phone (In case of emergency)	Other Phon	e (In case of emergency)
POSTCODE	HOME-PHONE	MOBILE-PHONE	OTHER-P	PHONE
Family Email				
FAMILY-EMAIL				

All persons who assist in any way with the Club's activities will need to become members or associate members of the Club and hence of the ASA and the relevant membership fee shall be paid.

#### **Notes**

## **ASA Category:**

- 1 Members who are learning to swim or who are swimmers at any level, who do not compete in any discipline in open competition
- 2 Members who compete in any discipline in open competition
- 3 Members who are not in categories one or two e.g. administrators; associate members; coaches; helpers; officials; patrons; teachers

#### **Ethnicity Code:**

A - White British, B - White Irish, C - White-Other, D - Asian-Indian, E - Asian-Pakistani, F - Asian-Bangladeshi, G - Asian-Other, H - Chinese, I - Mixed-White and Black Caribbean, J - Mixed-White and Asian, K - Mixed-Other, L - Black-Caribbean, M - Black-African, N - Black-Other, O - Other

## Offers

- A I do / do not want British Swimming / the ASA to send me details of products and services
- B I do / do not want British Swimming / the ASA to send me details of events
- C I do / do not want British Swimming / the ASA to send me details from British Swimming / the ASA's partners

#### Category 2 Swimmers

Category 2 swimmers (those entering open meets), need to fill in the Yellow ASA form as well – please ask the membership secretary for a copy.

# **Swimmer and Associate Member Details**

First Membe	r Details		ASA registration number	MEMBER-ID-1	
Title	Forename			Initials	
TITLE-1	FORENAME-1			INIT-1	
Surname			Known As		
SURNAME-1			KNOWN-AS-1		
Gender	Ethnicity	Date of Birth (Day Month	Year) Mobile Pho	one	
GENDER-1	ETHNICITY-1	DATE-OF-BIRTH-1	PHONE-	PHONE-1	
Email					
EMAIL-1					
ASA Category	Disability / Medical (	Condition	Swimr	ning Class or Squad	
ASA-CAT-1	MEDICAL-1		CLA	SS-1	
Offers					
OFFER-A-1	Products and Services	FFER-B-1 Details of events	OFFER-C-1	ASA partner details	

				Club	Reference	CLUB-REF
Second Member Deta	nils			ASA registrati	ion number	MEMBER-ID-2
	ename			S. i Togiotiati		Initials
	ORENAME-2					INIT-2
Surname	OTTEN INTE Z			Known As		11411 2
SURNAME-2				KNOWN	100	
Gender Ethnicity			Date of Birth (Day Mon		Mobile Pho	20
GENDER-2 ETHNI			DATE-OF-BIRTH-2	iii ieai)	PHONE-2	
Email Email	011 1-2		DATE-OF-BINTIF-2		FIIONL-2	
EMAIL-2						
	Disability / Med	dical Candition			Curimm	ing Class or Squad
ASA Category  ASA-CAT-2	MEDICAL-2	dical Condition			CLAS	
Offers	IVIEDICAL-2				CLAS	00-2
	and Services	OFFER-B-2	Details of events	OFF	ER-C-2 A	SA Partners
Γhird Member Details	•			ASA registrati	ion number	MEMBER-ID-3
	ename			3 2 <b>9</b> .0di		Initials
	ORENAME-3					INIT-3
Surname	O. (LI W) IIVIL O			Known As		11411-3
SURNAME-3				KNOWN	-AS-3	
Gender Ethnicity			Date of Birth (Day Mon		Mobile Pho	ne
	CITY-3		DATE-OF-BIRTH-3	1001)	PHONE-3	
Email Email	J		DATE OF BILLING		, ITOIVE-S	,
ull						
EMAII -3						
EMAIL-3	Disability / Mod	dical Condition			Swimm	ing Class or Squar
ASA Category	Disability / Med	dical Condition				ing Class or Squad
ASA-CAT-3	Disability / Med	dical Condition			Swimm	
ASA Category  ASA-CAT-3  Offers	MEDICAL-3		Details of events	OFF	CLAS	SS-3
ASA Category  ASA-CAT-3  Offers		dical Condition  OFFER-B-3	Details of events	OFFI	CLAS	
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a	MEDICAL-3		Details of events	OFFI	CLAS	SS-3
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a	MEDICAL-3		Details of events	<u> </u>	CLAS	SA Partners
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detail	MEDICAL-3		Details of events	<u> </u>	CLAS	SS-3 SA Partners  MEMBER-ID-4
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Fourth Member Detain Formula Formu	MEDICAL-3  and Services  Is ename		Details of events	<u> </u>	CLAS	SA Partners  MEMBER-ID-4  Initials
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detain  Title  For  TITLE-4	MEDICAL-3  and Services  Is ename		Details of events	ASA registrati	ER-C-3 A	SA Partners  MEMBER-ID-4  Initials
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detain  Fittle  For  TITLE-4  Surname  SURNAME-4	MEDICAL-3  and Services  Is ename			ASA registrati	ER-C-3 A	SA Partners  MEMBER-ID-4 Initials INIT-4
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detai  Title For  TITLE-4  Gurname  SURNAME-4  Gender Ethnicity	MEDICAL-3  Ind Services  Is  ename  ORENAME-4		Date of Birth (Day Mon	ASA registrati	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho	SA Partners  MEMBER-ID-4 Initials INIT-4
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detain  Title Fore  TITLE-4  Surname  SURNAME-4  Gender Ethnicity  GENDER-4	MEDICAL-3  and Services  Is ename			ASA registrati	CLAS ER-C-3 A ion number	SA Partners  MEMBER-ID-4 Initials INIT-4
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detai  Title For  TITLE-4  Gurname  SURNAME-4  Gender Ethnicity  GENDER-4  Email	MEDICAL-3  Ind Services  Is  ename  ORENAME-4		Date of Birth (Day Mon	ASA registrati	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho	SA Partners  MEMBER-ID-4 Initials INIT-4
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detain  Title Fore  TITLE-4  Surname  SURNAME-4  Gender Ethnicity  GENDER-4  Email  EMAIL-4	MEDICAL-3  Ind Services  Is ename  ORENAME-4	OFFER-B-3	Date of Birth (Day Mon	ASA registrati	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho  PHONE-4	SA Partners  MEMBER-ID-4  Initials  INIT-4
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detai  Title For  TITLE-4  Surname  SURNAME-4  Gender Ethnicity  GENDER-4  Email  EMAIL-4  ASA Category	MEDICAL-3  Ind Services  Is ename  ORENAME-4  Disability / Medical	OFFER-B-3	Date of Birth (Day Mon	ASA registrati	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho PHONE-4	SA Partners  MEMBER-ID-4 Initials INIT-4  ine
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detail  Fitle  For  TITLE-4  Gunname  SURNAME-4  Gender  GENDER-4  Email  EMAIL-4  ASA Category  ASA-CAT-4	MEDICAL-3  Ind Services  Is ename  ORENAME-4	OFFER-B-3	Date of Birth (Day Mon	ASA registrati	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho  PHONE-4	SA Partners  MEMBER-ID-4 Initials INIT-4  ine
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detai  Fitle For  TITLE-4  Furname  SURNAME-4  Gender Ethnicity  GENDER-4  Email  EMAIL-4  ASA Category  ASA-CAT-4  Offers	MEDICAL-3  Ind Services  Is ename  ORENAME-4  Disability / Medical	OFFER-B-3	Date of Birth (Day Mon	Known As  KNOWN th Year)	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho PHONE-4  Swimm CLAS	SA Partners  MEMBER-ID-4 Initials INIT-4  ing Class or Squad
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detail  Title For  TITLE-4  Surname  SURNAME-4  Gender Ethnicity  ETHNI  Email  EMAIL-4  ASA Category  ASA-CAT-4  Offers  OFFER-A-4  Products a	MEDICAL-3  Ind Services  Is ename  ORENAME-4  Disability / Medical-4  Ind Services	OFFER-B-3	Date of Birth (Day Mon	Known As  KNOWN th Year)	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho PHONE-4  Swimm CLAS	SA Partners  MEMBER-ID-4 Initials INIT-4  ing Class or Squades SA Partners
ASA Category  ASA-CAT-3  Differs  OFFER-A-3  Products a  Fourth Member Detain  Title  For  TITLE-4  Gurname  SURNAME-4  Gender  GENDER-4  Email  EMAIL-4  ASA Category  ASA-CAT-4  Differs  OFFER-A-4  Products a  No. of swimmers	MEDICAL-3  Ind Services  Is ename  ORENAME-4  Disability / Medical-4  Ind Services  SWIM-MEM	OFFER-B-3	Date of Birth (Day Mon	Known As  KNOWN th Year)	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho PHONE-4  Swimm CLAS  ER-C-4 A	SA Partners  MEMBER-ID-4 Initials INIT-4  ing Class or Squad
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detain  Title  For  TITLE-4  Surname  SURNAME-4  Gender  Ethnicity  ETHNI  Email  EMAIL-4  ASA Category  ASA-CAT-4  Offers  OFFER-A-4  Products a  No. of swimmers  No. of associate members	MEDICAL-3  Ind Services  Is ename ORENAME-4  Disability / Med MEDICAL-4  and Services  SWIM-MEM ASSOC-MEM	OFFER-B-3	Date of Birth (Day Mon	Known As  KNOWN th Year)	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho PHONE-4  Swimm CLAS	SA Partners  MEMBER-ID-4 Initials INIT-4  ing Class or Squades SA Partners
ASA Category  ASA-CAT-3  Offers  OFFER-A-3  Products a  Fourth Member Detai  Title For  TITLE-4  Surname  SURNAME-4  Gender Ethnicity  ETHNI  Email  EMAIL-4  ASA Category  ASA-CAT-4  Offers  OFFER-A-4  Products a	MEDICAL-3  Ind Services  Is ename  ORENAME-4  Disability / Medical-4  Ind Services  SWIM-MEM  ASSOC-MEM  £ ANN-FEE	OFFER-B-3	Date of Birth (Day Mon  DATE-OF-BIRTH-4  Details of events	Known As  KNOWN th Year)	CLAS  ER-C-3 A  ion number  -AS-4  Mobile Pho PHONE-4  Swimm CLAS  ER-C-4 A	SA Partners  MEMBER-ID-4 Initials INIT-4  ing Class or Squades SA Partners

Signature (parent/guardian for under 18s)

Date \_\_\_\_\_