



MEMBERSHIP FORM

Please tick the relevant squad you are joining.

Academy Squad ☐

Competition Squad ☐

Performance Squad ☐

Masters Squad ☐

SECTION A – Swimmer & Parent Contact Info (If Over 18 please put your own contact details)

Swimmers Surname:	D.O.B:	
Swimmers Forename:	Gender:	
Address 1:	Parent Name:	
	Parent Mobile:	
County:	Landline:	
Post code:	Parent Email:	

SECTION B – Emergency Contact Details. (If possible please leave two contact numbers)

1) Name:	2) Name:
Relationship:	Relationship:
Contact No 1:	Contact No 1:
Contact No 2:	Contact No 2:

SECTION C – Members Medical Information - Please state any medical conditions, disability or other factors which need consideration for inclusion in club activities. Please include details of any prescribed medication taken regularly by swimmer.

SECTION D – Payment (please tick the relevant squad and payment method)

Squad:	Fee:	Payment Method Required:	Tick:
ASA & Club Membership (All swimmers)	£40 per year	Bank Transfer on Date of Joining	<input type="checkbox"/>
Academy Squad	£36 per month	Standing Order 1 st of Each Month	<input type="checkbox"/>
Competition or Performance Squad	£40 per month	Standing Order 1 st of Each Month	<input type="checkbox"/>
Masters <i>Casual</i> Squad	£22 per month	Standing Order 1 st of Each Month	<input type="checkbox"/>
Masters <i>Competitive</i> Squad	£30 per month	Standing Order 1 st of Each Month	<input type="checkbox"/>
Please state the surname of the account being used to make this standing order			

SECTION E – Declaration and Consent: To be signed by parent/guardian if under 18

1) I acknowledge the rules and codes of conduct of KGSC 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 codes of conduct. Current club rules are available online at www.kgsc.co.uk

2) I consent to my child being transported to/from galas on coaches provided by KGSC.

3) I consent to the use of photography/filming for technique analysis and marketing material.

You will be deemed to have consented by signing this membership form. You can withdraw your consent at any time by informing the Membership Secretary in writing.

All data collected on this membership form will be kept securely by club personnel and medical/disability information will be provided to teachers/coaches on a need to know basis. If at any time any of the above details change please contact the Membership Secretary.

Name (print):

Signature:

Date: