



Application Form for Chislehurst Millennium Swim Squads
For members under 16 years of age

Applicant's Details

Surname:

First Name(s):

Date of Birth:

Address:

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Parents' Details and Alternative Contact Details

Parent

Alternative Contact

Surname:

Surname:

First Name(s):

First Name(s):

Address (If different from above):

Address (If different from above):

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Contact Details

Phone Number:

Phone Number:

Mobile Number:

Mobile Number:

Email:

ASA Ethnicity Definitions. Please state your ethnic definition.

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 ethnic group	P Prefer not to say					

The ASA has a data protection policy that can be viewed on

<http://www.swimming.org>

ASA send out details of products, services, events. Do you want this?

Yes / No

ASA share information with partners. Do you want this?

Yes / No

Do you want to hide your details on the ASA database?

(This may affect your ability to enter events as it will mean your details are not visible on the rankings database!)

Yes / No

Please also complete the following forms attached

1. Medical information form
2. Photography consent or refusal of consent form
3. The members' Code of Conduct
4. Parent's Code of Conduct

Signed:

Date:

Please return all the forms to: Club Secretary

14 Hartfield Crescent, West Wickham, Kent. BR4 9DN