

# Bottisham Swimming Club

## Trial Application Form



### Parent / Guardian Details

<b>Name</b>			
<b>Address</b>			
		<b>Postcode</b>	
<b>Email</b>			
<b>Telephone</b>	Day	Evening	Mobile

<b>Swimmer's Name</b>		
<b>Date of Birth</b>		<b>Male / Female</b>

I agree to allow Bottisham Swimming Club to maintain the above information on computer under the provisions of the data protection act. (tick box)

We are also required to pass swimmer and parent details to the Amateur Swimming Association (ASA) as part of their annual swimmer registration process. This requires the completion of a further form which we will supply you with in due course if you are accepted.

### Additional information

Do you belong to any other swimming club?	Yes / No
If yes, please name the club(s) _____	
Do you intend to continue your membership there?	Yes / No

Do you suffer from any illnesses that may affect your training?	Yes / No
If yes please give details: _____	

How did you learn about our Club? \_\_\_\_\_

Swimmer's signature \_\_\_\_\_

(if under 16 parent or guardian) Application date \_\_\_\_\_

Admit to: Junior / Intermediate / Senior

Admission status: 3 month probation / special (give details)

Fees to commence from \_\_\_\_\_

Admitting coach name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_