# Chorley Marlins ASC.

Club Membership Form 2023

**Club Train– Members who are learning to swim and do not compete in any discipline**

**in open competition**

**Club Compete– Members who compete in any discipline in open competition**

**Club Support – Members who are non-swimmers**

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| --- |
| \*1 Swimmers Details |
| Name: Age: D.O.B. |
| Address: Contact Details if different from Parents/Guardians  Home Telephone No: Mobile No:  Postcode: |
| Male/Female Nationality: Religion: Language: |
| ASA Number: Previous Club / Additional Club: |
| Do you intend to remain a member of your previous club. Yes No |

Please state any Disabilities or Special requirements needed, Medical Conditions such as Asthma, Diabetes, Allergies, Epilepsy that you may have that require regular medication, (If None—write “None”)

\*2

Medical Information

The Information disclosed is confidential and is only for the coaches who need to know

|  |  |
| --- | --- |
| Please note that coaches are not permitted to administer or hand Inhalers to swimmers.  **SWIMMERS AND PARENTS SHOULD BE AWARE THAT INCORRECT OR NONE DISCOLSURE OF INFORMATION COULD RESULT IN THE INSURANCE COVER OFFERED TO THE CLUB BY THE ASA WILL BE NULL & VOID**  **CHORLEY MARLINS WILL NOT BE HELD RESPONSIBLE FOR ISSUES ARISING DUE TO INCORRECT OR NONE DISCLOSURE OF CORRECT MEDICAL CONDITIONS** | |
| Name of G.P. | I (PLEASE PRINT ON BLOCK CAPITALS)……………………………………………………………….  Hereby give permission for the Coach or Team Manager or authorised person accompanying my child/myself to give the immediate necessary medical or surgical treatment as directed by medical authorities.  Signature ….………………………………………….……… (Parent/Guardian if under 18)  Date…………….………… |
| Surgery address:  Surgery telephone No: |

**It is the responsibility of the parents/guardian to inform the lead coach at the time, before the commencement of the session, if the swimmer is suffering from any new illness or injury that may affect their ability to train. IS ASTHMATIC, INHALERS MUST BE WITH THE SWIMMER AT ALL TIMES**

|  |  |
| --- | --- |
| \*3 Parent / Guardians & Emergency Contact Details | |
| Name: | Name: |
| Address: (if different from child)  Postcode: | Address: (if different from child)  Postcode: |
| Home No: Mobile No: Email Address: | Home No: Mobile No: Email Address: |

\*4 Photography, Publicity & Videoing

From time to time the club may wish to take Photographs of swimmers for publicity purposes for the local newspaper or display them on the club website. The club where possible will not undertake the use of shots of swimmers in swimwear. The SE recommends that such photos do not identify swimmers by name, however the newspaper may request such information for editorial purposes. The club may on occasions take videos of swimmers training using the clubs underwater camera, such videos will only be used for training analysis and feedback, the footage is discussed at the time of the recording and thereafter subsequently deleted.

|  |  |  |  |
| --- | --- | --- | --- |
| \*Do you consent to your child’s photo appearing on Social Media | Y / N | Club Website | Y / N |
| \*Do you consent to your child’s photo appearing in the newspaper? | Y / N | Club Website | Y / N --\_\_ |
| \*Do you consent to your child’s name appearing in the newspaper? | Y / N | Club Website | Y / N |
| \*Do you consent to your child being videoed by the club coach for training | Purposes? | Y / N |  |

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Additional Information

Parents and Over 18’s

Chorley Marlins is run by a group of volunteers, of which most are parents of swimmers at the club. Without these volunteers the club would cease to exist. The Chorley Marlins website holds more information on the different roles and responsibilities within the club and how you may be able to help, please visit the volunteers page, if you feel you can spare a little time each week and would like to get involved, if you could please provide us with a little information about yourself by answering the following questions. Thank-you

In what area would you be most interested in volunteering? (eg committee, on poolside, fundraising etc)

Do you have any particular skills or experience that you feel could help be of assistance or of benefit to the club

Do you hold current qualifications in coaching sports? If so, in which sport and at what level?

Different roles within the club demand different amounts of time devoting to them, what amount of time do you feel you could commit to the club each week?

\*6 Declaration

* I/we understand and consent to my/our child taking part in activities carried out at the club training sessions, in the water or land based and acknowledge that the club is not liable in the event of an accident, unless there was a failure in the duty of care during the session.
* I/we agree to ensure that our child is collected promptly by a responsible adult after each training session I/we understand that the swimmers are not the clubs responsibility once they have left the pool area.
* *I/we acknowledge receipt of the rules of CHORLEY MARLINS ASC 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 rules*.
* I/we agree to abide by the clubs rules, policies and procedures, the clubs constitution and byelaws and understand these are available to read on the clubs web- site. I/we understand that such rules and procedures are subject to annual review and will change from time to time.
* I/we agree to keep the club informed of any changes to medical information given on this form and to ensure that the relevant pages of the swimmers log book are updated and brought to all sessions attended.
* I/we agree to pay all fees required, both monthly and annually until such time I/we withdraw from the club, and understand that I must inform the Head coach / Membership secretary should I / my child wish to leave the club at anytime
* I/we understand that the details provided on this form will be held on the clubs database, this is confidential and used only for the efficient operation of the club. Only elected officials of the club have access to the database

\*Members Signature:

\*Signature of Parent/Guardian:

Date:

* Signed on behalf of Swimmers under the age of 18 years or person who has legal responsibility for the child as defined by the Children’s Act 2004

**We are committed to respecting your privacy and such we comply with the law on data protection, for the purposes of data protection. The club will use your personal data for the purpose of your child’s involvement in training, activities or competitions with the club. For further details of how we process your personal data or your child’s personal data please our Privacy Policy. The Clubs Privacy Policy can be found on the website** [**https://www.chorleymarlins.org.uk/documents .html**](https://www.chorleymarlins.org.uk/documents%20.html) **Club members have the right to remove data from the clubs records. 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.**

NEW MEMBERS

* **New members are required to complete the correct SE membership form whether they are competitive or none competitive swimmers along with this club membership form, fees are to be paid by standing order on a monthly basis and a mandate should be completed and handed to their liaison officer before the commencement of any swimming, for further information, including current training times and fees can be found on the club notice board or website** [**www.chorleymarlins.org.uk**](http://www.chorleymarlins.org.uk/) **or are available from the Membership Secretary at** [**membership@chorleymarlins.org.uk**](mailto:membership@chorleymarlins.org.uk)
* Denotes Mandatory completion of these sections