5885043250

ASA/British Swimming Category 1 and 3 Registration Form

Please complete this form in black ink and use block capitals

(* Mandatory)

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Membership Category*

☐ Category 1 ☐ Category 3

Member ID (If Known)

D.O.B.* __ __ . __ __ . __ __ __ __

Title* **Forename*** Middle Initials

Known as **Surname***

Address *

Post Town*

Post Code* **Tel***

email

Gender*

☐ Male ☐ Female

Ethnicity Code

(See over for guidelines)

Club Code	Date of Joining	Club Officer Signature *
	__ __ . __ __ . __ __ __ __	
	__ __ . __ __ . __ __ __ __	
	__ __ . __ __ . __ __ __ __	

Note: The list of clubs of which you are a member of must be completed in chronological order i.e. in order of longest CONTINUOUS membership

Consent

I confirm that I am a member of the club(s) listed above.I agree to abide by the rules of the ASA and British Swimming. I understand that by submitting this form, I am consenting to receiving information about ASA / British Swimming initiatives from the ASA / British Swimming and their commercial partners by post, email, SMS/MMS, online or phone unless I tell you otherwise.

Offers and opportunities - Please tick any of the relevant boxes below

No thank you, I don't want British Swimming/the ASA to send me details of products and services ☐

No thank you, I don't want British Swimming/the ASA to send me details of events ☐

No thank you, I don't want British Swimming/the ASA to send me details from British Swimming/the ASA's commercial partners ☐

Hide my details (This may affect your ability to enter events - please see overleaf)

If you do not want details of your achievements to be visible on the British Swimming Website please tick here ☐

Signature of club member*

I understand that by signing this form I am confirming that I have received, read and understand the ASA/British Swimming Data Protection Notice in relation to the collection and use of my information.

Date* __ __ . __ __ . __ __ __ __

The section below must be signed by the parent/guardian of any member under the age of 18 years. As the parent or person in loco-parentis of the swimmer named above. I also agree to release his/her personal and other details for the purposes overleaf.

Signed

Date __ __ . __ __ . __ __ __ __