



President: Steve Parry

## Swimmers Membership Registration Form - 2009-10

It is mandatory that any competitive member of Gallica shall have and maintained their ASA Category 2 registration with their 1<sup>st</sup> claim club.

Please complete in block capitals

Applicant Details					
1 <sup>ST</sup> NAME	2 <sup>ND</sup> INITIAL	SURNAME			
ADDRESS:					
POSTCODE:					
MEMBER'S SIGNATURE:					
<b>Disability Swimmer Details:</b>					
(Please tick nature of disability):    Ambulant 0    Visual 0    Hearing 0    Wheelchair 0    Learning 0					
<b>Swimming Category:</b>					
Please state category for competition swimming:					
1 <sup>ST</sup> CLAIM CLUB:			DATE OF BIRTH		
Date of achieving ASA Racing Start Award: (Evidence is required for this award)			D	D	M
			M	Y	Y
ANNUAL REGISTRATION FEE - £10.00	<b>SQUAD EAST SENIOR COASTAL</b>				
MONTHLY FEES TO BE PAID BY STANDING ORDER					
ANNUAL REGISTRATION FEES ARE DUE ON OR BEFORE THE 1 <sup>ST</sup> OCTOBER		ASA MEMBERSHIP NUMBER:			
We ask to be notified of any health problems (including allergies). Any swimmer with a medical condition or taking any vitamins/supplements must complete the ASA mandatory Medical Declaration form and return a copy along with their membership document to your squad rep to be held on file.					
<b>ACKNOWLEDGEMENT</b>					
I agree to abide by the rules of the Club, including the payment of my child's fees at the appropriate date each month – unless otherwise agreed with the Club Officials (as per the Club Rules).					
I also agree that the details enclosed on this form may be held on the Club's database, only for the purpose of Gallica (Lancashire SC). This is in compliance with the Data Protection Act.					
<b>For any member under 18 years of age, it is a requirement of Gallica (Lancashire) for the parent/guardian to sign below</b>					
Parent/Guardian		ASA Membership ID			
1) Mr/Mrs/Miss					
2) Mr/Mrs/Miss					
Email address:					
Home Phone Number:		Mobile Phone Number:			
Emergency contact Number		Contact Name:			
Name:					
Signed:			Date:		
I am the parent/guardian					

The annual Membership Fee is now due. The fee for 2009/10 will be £10.00 per swimmer.

**PLEASE RETURN ALL COMPLETED FORMS TO YOUR SQUAD REP before the 1<sup>st</sup> October 2009.**