



Dear Swimmer / Parents,

Welcome to Aylesbury & District Swimming Club. A coach or teacher will assess you and place you in the squad best suited to you. You are then invited to take part in two sessions before deciding whether you would like to join the Club. If you decide to join, please then complete and return the attached forms to Membership Secretary Debra Morgan.

The annual registration fee is £20 to ADSC plus a compulsory fee to the ASA. This provides you with insurance cover and also the eligibility to represent Aylesbury & District in galas, open meets and County, Regional and National Championships.

There are two levels of affiliation to the ASA dependent on the level of competition a swimmer competes in:-

The ASA set a different level of fees for each category and if you require further information on the ASA's fees please contact Andy Willis on [Andy@adsc.org.uk](mailto:Andy@adsc.org.uk).

The amalgamated annual ADSC registration and ASA affiliation fee for 2010 is as follows:-

£28.90 – payable by all swimmers in ADSC Learn to Swim, Parry and Gibson squads and swimmers in the Masters section who do not compete.

£45.25 – payable by all other swimmers.

ADSC teachers and coaches give their time on a voluntary basis, both on and off poolside and it is thanks to their hard work and dedication that ADSC is an extremely low cost club when compared to others in the area. Monthly training fees are payable by standing order but we ask that you pay the first month's fees by cheque (payable to ADSC) to allow you time to set this up. Fees per month for 2010 are as follows:

Learn to Swim, Parry	£ 22
Gibson	£ 24
Goodhew	£ 26
Moorhouse, Foster, Hickman, Masters	£ 29

Family discounts apply at 10% for two swimmers, 15% for three and 20% for four.

Once the formalities are complete you will be welcome to attend all the sessions allocated to your squad. An ADSC coach or teacher will tell you when these are and they can also be found on the ADSC website [www.adsc.org.uk](http://www.adsc.org.uk).

Thank you for choosing Aylesbury & District Swimming Club. Please contact me if there is anything you would like to discuss.

**Kathy Jeffrey**  
**ADSC Chairman**

**Tel: 01296 336580**

**Email: [kathy@adsc.org.uk](mailto:kathy@adsc.org.uk).**

# AYLESBURY AND DISTRICT SWIMMING CLUB

(Affiliated to Oxon & North Bucks County and South East Region ASA)



## Membership Application Form 2010

### Swimmers Details:

Membership Number: \_\_\_\_\_

Surname: \_\_\_\_\_

First Names: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Post Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_

Mobile: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Male/Female: \_\_\_\_\_

### Contact in case of emergency:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: Home: \_\_\_\_\_

Mobile: \_\_\_\_\_

Relationship: \_\_\_\_\_

Second contact name: \_\_\_\_\_

Second contact number: \_\_\_\_\_

**Please include all swimmers and the total family payment per month, to be paid by Standing Order on 5<sup>th</sup> of every month:**

Name	Squad	Amount
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_____		£
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_____		£
-------	--	---

_____		£
-------	--	---

_____		£
-------	--	---

Less Family Discount		£
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Total		£
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\*2 family members 10% 3 family members 15%

4 family members 20% PTL 25% off all members.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Swimmer or Parent/Carer (if swimmer is under 18).

Would you be prepared to be a volunteer helper

Yes/No.

I give/do not give\* my consent to be photographed as part of the ADSC team for possible publication in the local media. (\* Please delete as appropriate).

I enclose my registration fee and ASA fee (payable to ADSC at the start of each year of joining.)

Registration Category 1 £28.90 (LTS and Parry Gibson)

Registration Category 2 £45.25 (All other squads.)

I enclose payment of fees for the first month together with my fees form and understand that future monthly training fees are payable at the start of each month by standing order.

Monthly payment shall be made by Standing Order. I shall instruct my bank to set up my standing order for payment for the next month of training and subsequent training sessions. (Details included). **If I terminate my membership I will be responsible for the cancellation of my standing order.**

I confirm that the rules of Aylesbury and District Swimming Club (as amended from time to time) shall govern my membership of the Club and I accept the responsibilities of membership as set out in these rules. Any correspondence should always contain my membership number.

**I understand that if I fall into arrears by 2 monthly payments the club reserves the right to terminate my membership. If I wish to cancel my membership I will give 1 months notice by contacting the membership secretary. I agree to these terms.**

**Signed:**

### **Return by post to:**

MRS DEBRA MORGAN

8 ISIS CLOSE,

AYLESBURY

BUCKS HP21 9LY

E-mail: [Debbie@adsc.org.uk](mailto:Debbie@adsc.org.uk)

Information held by ADSC relating to its members will only be used for club records and club related business.

### **For Club Use Only:**

Trial Date \_\_\_\_\_

Membership Number: \_\_\_\_\_

Squad: \_\_\_\_\_

ASA Category: \_\_\_\_\_ ASA Number: \_\_\_\_\_

Debbie: \_\_\_\_\_ Registration: \_\_\_\_\_ ASA: \_\_\_\_\_

## CLUB MEDICAL INFORMATION & CONSENT FORM

To be completed by the parent(s) or guardian(s) of all children under 18 & all swimmers 18 & over

Swimmer's Name.....	Home Telephone Number.....
Address.....	
.....Post Code.....	
Date of Birth.....	e-mail address.....
Parent (1) Mobile Telephone Number.....	Parent (2) Mobile Telephone Number.....
Parent (1) Work Telephone Number.....	Parent (2) Mobile Telephone Number.....
Family GP.....	Telephone Number.....

**Does your child have any specific medical conditions requiring medical treatment and / or medication ?  
If so, please give details – including dosage & frequency of any medication:**

**Does your child suffer from asthma & if so, are they registered with the ASA as asthmatic ?**

**Does your child take any medication for asthma ?  
If so, please give details:**

**Does your child have up to date Tetanus cover ?**

**Does your child have any food, drug or other allergies ?  
If so – please give details:**

**Does your child suffer from any disabilities (physical, visual or hearing) or learning / recognised behavioural problems that could affect their behaviour while training eg ADHD ?  
If so – please give details:**

**Does your child have any specific dietary needs ?**

## DECLARATIONS

1. To the best of my knowledge & belief, the information given above is complete & accurate.
2. I undertake to keep the Club informed of any changes that may arise in relation to the above information.
3. It may be necessary at some time for the teachers, coaches or team management staff accompanying your child to have the necessary authority to obtain any urgent treatment which may be required. By signing the declaration below, you are giving consent for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son's/daughter's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.
4. I am aware of the type of activities likely to be undertaken & consent to my child taking part. I acknowledge that the Club will be liable in the event of an accident only if they have failed to take reasonable steps in their duty of care for my child. I understand that the staff have a common law duty to act in the capacity of a reasonable prudent parent.
5. I am aware of the Club's Rules, Disciplinary Policy & Codes of Conduct & acknowledge the need for my child to abide by these conditions at all times. Failure to do so may result in sanctions being applied. In the event that such action involves expense, I accept a responsibility to meet any such costs reasonable incurred.

Signed by Parent / Guardian.....

Date.....

**DATA PROTECTION NOTICE**  
Collection and use of your information

**About us.** The Amateur Swimming Association (**ASA**) is a constituent member of British Swimming Limited (**British Swimming**). The other members are the Welsh Amateur Swimming Association (**WASA**) and the Scottish Amateur Swimming Association (**SASA**). The ASA has a number of subsidiary companies details of which can be found at [www.britishswimming.org](http://www.britishswimming.org).

**Purposes.** The ASA (which includes its subsidiaries) and British Swimming will each hold the details provided on this registration form with other information it holds or obtains from or about you and will use this for the following purposes:

- for maintaining records
- to respond to any enquiries you make
- to administer any events in which you participate or may wish to participate and to deal with any incidents involving you
- to create an individual profile for you so that we can understand and respect your preferences
- to create anonymised aggregated information about members and swimmers to enable us to secure funding
- to contact you about swimming events, offers and opportunities available from the ASA or British Swimming or any commercial partner of either of them by post, email, online or phone (where you have indicated you are happy to hear about these)

**Recording images.** The ASA and British Swimming may record the competition events in which you participate and general images of swimmers will form part of the information we hold and use. In addition to the purposes for general information set out above, the ASA and/or British Swimming may use these recordings and images for the purposes of education and training, swimmer analysis, promotion, performance, development and selection and event analysis.

**Other uses.** Where your information may be used for additional purposes, such as medical information, you will be provided with further details of how your information will be used at the relevant time

**Disclosure of your information**

**Publications on websites.** Details of your achievements in events will be included on the British Swimming website(s) and these will be available to the general public. If you do not want your details to be visible in this way you can block them by registering via the Home Country Membership Check webpage and selecting the 'hide' option, by ticking the appropriate tick box at the end of this form, or by contacting the ASA Rankings department with your request to hide your details

**Caution**

If you hide your details they will not be visible on the Rankings Database which may affect your ability to enter events. Event organisers may in these cases require proof of age and/or of eligibility to enter and you should contact the particular organiser to check.

Regions, Sub-Regions, County Associations and Clubs that organise their own competitions may publish details on this website and if you wish to hide this information you should contact the Region/ County/Club directly.

**Data use outside of the EU.** If you apply for or take part in an event that takes place outside the European Union, your information will be disclosed to the relevant event organiser(s) in the host nation. These nations may not have laws as stringent as ours to protect your personal data.

**Images.** Images may be disclosed to those Regions, Sub-Regions, County Associations and Clubs for which you are a member for swimmer selection purposes. They may also be disclosed to the media for promoting swimming and the reporting of events. You should see the data protection policy for the relevant Region, Sub-Region, County Association and Club(s) for details of how your information will be used.

**WASA and SASA.** As constituent members of British Swimming, WASA and SASA will be able to view your information for swimming administration purposes only.

**Drugs testing**

If you enter swimming competitions, you may be subject to doping control as part of the ASA/British Swimming commitment to a drug free sport. At the time of sample collection, your personal data will be collected by UK Sport which undertakes the testing and administers the programme. You should see the data protection notice for UK Sport for details of how your information will be used (<http://www.uk sport.gov.uk/pages/adams/>)

**Marketing**

**Partners.** The ASA and British Swimming each work with a number of sponsors and commercial partners (details of these can be found at [www.britishswimming.org](http://www.britishswimming.org)) to promote swimming, raise funding for the sport and to secure opportunities for members. The ASA and British Swimming would like to contact you by post or electronically to tell you more about the offers available to you. Partners help us serve you better by telling us if you express an interest in their goods and services.

**Opt outs.** You have the right to refuse direct marketing and can do so by ticking the relevant box(es) on the form below.

**You are entitled to a copy of your personal data from the ASA and/or British Swimming (a small fee will be payable in each case) and to correct any inaccuracies in it. For details of how to do this you should contact Regulatory Compliance Manager, Harold Fern House, Derby Square, Loughborough, Leicestershire, LE11 5AL.**

**Consent Form**

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**

No thank you, I don't want British Swimming / the ASA to send me details of products and services. Please tick	
No thank you, I don't want British Swimming / the ASA to send me details of events. Please Tick	
No thank you, I don't want British Swimming / the ASA to send me details from British Swimming / the ASA's commercial partners. Please Tick	
<b>Hide my details</b> (this may affect your ability to enter events – please see above) If you do not want details of your achievements to be visible on the British Swimming website please tick	

Signed	
Date	
<b>If you are under 18, your parent / guardian must countersign below:</b>	
Signed(parent/guardian)	
Date	

**ADSC STANDING ORDER MANDATE**

**TO BE TAKEN TO MY BANK:**

Reference.....(Swimmers Name/Membership No)

Amount of Payment.....

**Date of Payment: 5<sup>th</sup> of the month from receipt of this form until further notice.**

**BENEFICIARY BANK ACCOUNT DETAILS:**

Aylesbury and District Swimming Club

Baclays Bank

Sort Code: 20-03-18

Account Number: 60051144