

Membership Form

Please complete all details and return to the Registration Officer

Swim Ireland Number if existing member

SECTION A: MEMBER DETAILS

(Enter the swimmers details – except for * fields)

Title:		Address 1	
First Name:		Address 2	
Middle Name:		Address 3:	
Surname:		Town:	
Date of Birth:		County:	
Gender		Country:	
*Phone:		*Mobile:	
*Email:			

*Please note: If the member is U18 contact details should be the parent/carers

Is this person the head of family Yes / No
(Oldest child)

If not can you enter the ID of the head of their family (U21)
(Swim Ireland Number if you have it)

Names of siblings in Sligo Swim Club:

SECTION B: MEDICAL INFORMATION

Please detail below any important medical information that our coaches/team managers should be aware of (e.g. epilepsy, asthma, diabetes, allergies) **Please do not leave blank** – If there is no information please write 'None'

SECTION C: EMERGENCY CONTACT DETAILS

Please indicate the information below to indicate the persons who should be contacted in the event of an incident/accident

Emergency Contact 1 Name:	
Emergency Contact 1 Relationship:	
Emergency Contact 1 Number:	
Emergency Contact 2 Name:	
Emergency Contact 2 Relationship:	
Emergency Contact 2 Number:	

SECTION D: PHOTOGRAPHY & VIDEO

In accordance with the Swim Ireland Filming and Photography policy, we only permit photographs, video or other images of children/young people to be taken with consent.

Photographs/videos will be taken by an appropriate person appointed to do so by County Sligo Swimming Club. Any images will be used, held and stored in accordance with the Swim Ireland Filming and Photography Policy as specified in latest version of the Swim Ireland Safeguarding Policies. No child/young person will be identified individually in any published image or film footage.

County Sligo Swimming Club request permission to photograph and/or record video footage of your child's involvement in their sport for the purposes of publicising and promoting the club and/or sport.

SECTION E: CLUB PRIVACY STATEMENT

County Sligo Swimming Club take the protection of the data that we hold about you as a member seriously and will do everything possible to ensure that data is collected, stored, processed, maintained, cleansed and retained in accordance with current future data protection legislation.

Please read the full privacy notice carefully to see how County Sligo Swimming Club will treat personal information that you provide to us. We will take reasonable care to keep your information secure and to prevent unauthorised access.

The County Sligo Swimming Club privacy statement is included with the membership pack and is available on our website.

SECTION F: DATA SHARING WITH SWIM IRELAND

When you become a member of or renew your membership with County Sligo Swimming Club you will automatically be registered with Swim Ireland through the Swim Ireland online membership database. We will provide Swim Ireland with your personal data which they will use to enable your personal access to the membership database. Swim Ireland will contact you to sign in and update your profile (which, amongst other things allows you to set and amend your opt-ins and privacy settings). It is vital therefore that a valid email address is given, so that you can ensure that your data is correct and so that your own privacy settings.

If you have any questions about the continuing privacy of your personal data when it is shared with Swim Ireland, please view the privacy policy on the Swim Ireland website or on sign up through the online membership database you will be presented with the relevant policy.

SECTION G: AGREEMENTS & CONSENTS

County Sligo Swimming Club recognises the need to ensure the welfare and safety of all young people in our sport. Please tick the appropriate boxes below to confirm the declarations.

I agree to abide by the Swim Ireland Safeguarding Policies and Rules of Swim Ireland (available on Swim Ireland Website) or on request to Registration Officer.	<input type="checkbox"/>
I agree to abide by the Swim Ireland Code of Conduct for Young Persons.	<input type="checkbox"/>
I have never been asked to leave a sporting organisation? (If you leave blank, we will contact you in confidence)	<input type="checkbox"/>

By ticking the boxes below you consent to the following.

I consent to my special category personal data provided in Section B to be shared with coaches/team managers or other appropriate personnel for the purposes of the delivery of safe participation in club activities.	<input type="checkbox"/>
I consent to my emergency contact details to be shared with coaches/team managers or other appropriate personnel in the case of an emergency.	<input type="checkbox"/>
I confirm that I give permission to be filmed and/or photographed. Photographs and/or video may be used in accordance with the Swim Ireland Filming and Photography Policy.	<input type="checkbox"/>
I confirm I have read and understood County Sligo Swimming Club privacy statement (available on Club Website)	<input type="checkbox"/>
If I am a competitive swimmer I agree to my personal data and swimming times to be held and processed through Hy-Tek's swimming software	<input type="checkbox"/>
I agree to my personal data to be held on Club Management Software	<input type="checkbox"/>

Swimmer sign here:

Members Name:	
Members Signature:	
Date:	

Parent: If member is under 18 the parent/guardian must also sign and confirm the declarations:

I agree to attend as parent on duty to assigned sessions or organise a replacement. I understand that the training session will be cancelled if parent on duty is not available.	<input type="checkbox"/>
I agree to abide by the Swim Ireland Code of Conduct for Parents.	<input type="checkbox"/>
I agree to assist in running of and participate in fundraising events during the year, proceeds going towards day to day running costs of our club.	<input type="checkbox"/>

Parent/Carer Name:	
Parent/Carer Signature	
Date:	

Declaration of the Club:

I confirm that the above named has been accepted and is involved as a member of the club, and I have verified their date of birth.

Club Secretary: Signature: _____ Name: _____

Date: _____

It is your responsibility as club secretary for ensuring the accuracy and validity of the information that you submit using this form and Swim Ireland accept no responsibility whatsoever for any errors or omissions that you may make.