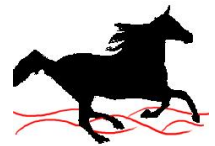


Newmarket & District Swimming Club

Swimming Since 1918



President: Robert Hicks

APPLICATION FOR MEMBERSHIP PLEASE RETURN TO :

**MRS ANNE SPURR
4, THE SHRUBBERIES
NEWMARKET
SUFFOLK
CB8 8JD
TELEPHONE: 01638 561022**

SURNAME : _____ FORENAME (S) : _____

ADDRESS : _____

POST CODE : _____ CONTACT PHONE NO : _____

DATE OF BIRTH : _____ MALE FEMALE

E.MAIL ADDRESS : _____

ETHNIC ORIGIN : _____

MEDICAL FITNESS / DISABLED CATEGORY :

Please state any Allergies, recurring/permanent illness or Disability.:

Also any Declarable Medication:

(All details will be treated in strictest confidence)

SWIMMING ABILITY: CLUB / OPEN / COUNTY / REGIONAL / NATIONAL

(Please delete as applicable)

CONTACT(S) NAME (S):

MR / MRS / MR & MRS / MS / MISS / OTHER _____

SIGNATURE : _____ (PARENT / CARER) DATE : _____
(If under 18 years)

RELATIONSHIP TO MEMBER:

NB: Data Protection Act : Club membership records are kept on a computer "database" for membership administration purposes only, for both NDSC & Forest Heath Saxons. If you *do not* wish to be included on this "database" - please tick box

WOULD YOU BE PREPARED TO BECOME A:

VOLUNTEER HELPER - OFFICIAL - TEACHER COACH - ADMINISTRATOR
(Please tick box and delete as applicable)

For Club Use Only :

FEES PAID		FEES PAID DATE :		AMJF PAID	DB	ASA		M / L		W/L Pack. Parent C.O.C.		JS/AS For Lists	ADD DB	NDSC MEM NO.	COPY
STO CHQ CSH	M QTR YR	CHQ CSH				CAT	ASA-F S/RB	C	TM	S	R	PB's			GROUP
	2009	2009 R/R				D/B	S-ASA PAID CARD SENT			S	R	T/G		ASA ID NO.	



NDSC Sponsored by:



www.newmarketswimclub.co.uk