



Bromsgrove Swimming Club

NEW MEMBERSHIP INFORMATION

Could you please answer the following request for information and return it to the Membership Secretary prior to your child starting lessons. The information will only be used by the Club for administration or medical purposes. No information will be forwarded to other parties. All information kept by the Club is available upon request from the Membership Secretary.

Surname

First Name

Middle Name

Date Of Birth/...../.....

Address

.....

.....

.....

Post Code

Email Address

Telephone

Name Of Parent

Emergency Contact No.

Date Of Joining/...../.....

Name(s) Of Brothers And/Or Sisters Who Also Swim At Bromsgrove Swimming Club

Are There Any Medical Conditions That The Club Needs To Be Aware Of? YES/NO

If So, Please Give Further Information Or Speak Directly To The Membership Secretary, Dave Gearey On (01905) 773322

Please Note That All Medical Conditions Are Treated In Strict Confidence.