

# Form 3: New Members Only

Application Form for Membership of Swim Ireland (Excluding Learn-to-Swim) PLEASE PRINT CLEARLY



Club: \_\_\_\_\_

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
*(Compulsory for all Competitors)*

Gender: M  F

Phone: \_\_\_\_\_

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

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

Email: \_\_\_\_\_

## Category of Membership

### COMPETITORS ONLY (Please tick discipline )

Swimming	Water Polo	Masters	Diving
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### NON-COMPETITOR (Please tick role )

Training only (non-competing participant)	Designated Person
Chairperson/President	Club Children's Officer
Secretary	Coach/Teacher
Treasurer	Associate Member (please give Associate member number)
Committee Member	Other (please specify)

Please list other Swim Ireland Clubs or 2<sup>nd</sup> Club you are involved with: \_\_\_\_\_

Do you agree to abide by the guidelines contained in the Code of Ethics and Good Practice for Children's Sport?  
Yes / No

Do you agree to abide by the Child Welfare Guidelines and rules of Swim Ireland? Yes / No

Have you ever been asked to leave a sporting organisation? Yes / No  
*(If you have answered yes, we will contact you in confidence)*

Have you ever been convicted of a criminal offence or been the subject of a caution; a Bound Over Order; or are you at present the subject of criminal investigations? Yes / No

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(If the Application is for an under 18 then the parent must also sign)

Parent's Signature: \_\_\_\_\_

As the Club Secretary 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: \_\_\_\_\_  
(Please print)