



Newport & District Swimming Club

MEMBERSHIP APPLICATION FORM

Once completed, the form should be returned electronically to
newportswimmingclub.membership@gmail.com

SECTION 1: APPLICATION DETAILS

This application covers the 2026 membership year from 1st Jan 2026 – 31st December 2026 please tick below membership being applied for:

	Membership	Amount
☐	Club Train (Non-competitive, Masters)	£60.00
☐	Club Compete (Competitive Swimmers)	£80.00
☐	Sibling Club Compete (Competitive Swimmers)	£70.00
☐	Club Support (Volunteers Only)	£0.00

Please can payment be made by 31st January 2026

To pay electronically the account details are

Newport and District Swimming Club

Account Number: 65224663

Sort Code: 30-99-50

Reference: Renewal Swimmers Surname

SECTION 2: PERSONAL DETAILS

Please complete below the details of the member being registered

Name:

Swim England

Number:

Male or Female:

Date of birth:

Home address

Email Address

Home Number

Mobile Number

Additional Information

(Please include any information that you believe is relevant to help us provide you with a positive experience. Some examples may include: gender pronouns, reasonable adjustments you require, previous swimming experience or simply a preferred nickname!)

Please Note: Emails will be coming from nadaswimclub@gmail.com, please check your junk box and release. If not receiving emails please feedback by email to the above address.

SECTION 3: EMERGENCY CONTACT DETAILS

As the person completing this form, you must ensure each person whose information you include in this form knows what will happen to their information and how it may be disclosed.

Name of an adult who can be contacted in an emergency

Phone number of named adult

Relationship which this person has with you

SECTION 4: MEDICAL CONTACT DETAILS

Name of Doctor/Surgery name

Doctor's telephone number

SECTION 5: DISABILITY & MEDICAL INFORMATION

We will use this information to establish if there are any additional needs / support / adjustments that you may require, please discuss this with us. The Equality Act 2010 defines a disabled person as anyone with 'a physical or mental impairment, which has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities'. Not providing this information will not affect membership to the Club but may affect our ability to help with any additional needs.

Does the swimmer have a Disability Classification?

If Yes, Classification Code:

☐ Yes

☐ No

Does the swimmer registering have any physical or mental health conditions that have lasted or are expected to last 12 months or more?

☐ Yes

☐ No

If yes, does this disability or illness affect any of the following areas (Tick all that Apply)?

☐ Vision impairment

☐ Hearing impairment

☐ Mobility impairment

☐ Dexterity impairment

☐ Learning impairment

☐ Memory impairment

☐ Mental Health impairment

☐ Breathing impairment

☐ Stamina/Fatigue impairment

☐ Developmental impairment

☐ Other Please Specify:

Further Information:

Regular Medication: _____

Please Note: If medication might be required during a session, it should be labelled and brought onto poolside and a Coach made aware

☐ I (PLEASE PRINT IN BLOCK CAPITALS) ... _____ hereby give my permission for the coach/ team manager or authorised person accompanying my child/myself to give the immediate necessary medical or surgical treatment as directed by medical authorities.

Signature: _____ (Parent/Guardian if U18)

Date: _____

☐ I consent to these medical details to be shared with coaches/leaders for the purposes of the delivery of safe participation in swimming activities.

Not providing consent will not affect membership to the Club, however giving us consent to share this information will help club volunteers to know how to respond effectively in the case of any medical emergency.

SECTION 6: PRIVACY STATEMENT

Newport & District Swimming Club takes the protection of the data that we hold about you as a member seriously and will ensure that the data you provide is processed in accordance with Data Protection Legislation. Please read our Data Privacy Policy (Our website under About Us – GDPR) carefully to see how the Club will treat the personal information that you provide to us.

CLUB PHOTOGRAPHY CONSENT

Newport Swimming Club will take steps to ensure that these images are used solely for the purpose they are intended, which is the promotion (e.g. posters, flyers, email, social media, our website and newspapers) and celebration of swimming achievements. When using photos for promotions we will not include details (e.g. name) on these advertisements.

If you do not wish to give consent for this please contact us to discuss how we can manage any potential photography.

☐ Yes ☐ No

VIDEO CONSENT

Permission for your child to be filmed for their learning purposes only

NB: footage deleted once used – will not be stored

☐ Yes ☐ No

COMMUNICATIONS CONSENT

Consent to receiving club communications to keep me up to date with the latest news/events.

☐ Yes ☐ No

SECTION 7: RECRUITMENT

Newport Swimming Club runs on volunteer power. We are always looking for new and enthusiastic helpers, be it poolside, fundraising, during competitions or on the Committee. Any help you can offer, be it a little or a lot would be greatly appreciated.

If you are a parent/guardian and would like to be involved, please tick

☐ Yes

SECTION 8: MEMBERSHIP AGREEMENT

MEMBERSHIP AGREEMENT

Please read **The Code of Conduct & Discipline Policy & Procedure** found on our website (www.nadaswimclub.org.uk) under About Us – Code of Conduct (please select the appropriate one)

Please tick all below to confirm your membership (Mandatory)

- ☐ I agree to taking part in the activities of the club.
- ☐ I understand and accept the responsibilities which I have regarding these policies
- ☐ I understand any breach of my responsibilities may lead to suspension of membership
- ☐ I understand the club will register my details with Swim England

MEMBERSHIP AGREEMENT – Parent/Carer (for Under 18's)

By returning this completed form, I confirm that I have read and understood the permission statements on this membership form and as Parent/Guardian I agree to support Newport Swimming Club in upholding these values and in ensuring that both my child and I act in accordance with expectations.

☐ I confirm I (the parent/carers) have read the **Code of Conduct – Parent & Discipline Policy & Procedure**

Signature

Date

MEMBERSHIP AGREEMENT - Swimmer

As a swimmer, I agree to support Newport Swimming Club in acting in accordance with these expectations, including the action that may be taken by my coach in the event of my misbehaviour.

☐ I confirm I (the swimmer) have read the **Code of Conduct – Athlete U18 & Discipline Policy & Procedure**

☐ I confirm I (the swimmer) have read the **Code of Conduct – Athlete 18 & over & Discipline Policy & Procedure**

Signature

Date

MEMBERSHIP AGREEMENT – Coaches, Committee Members, Officials, Volunteers

As a volunteer I agree to support Newport Swimming Club in acting in accordance with these expectations. (Please tick all that are relevant)

☐ I confirm I (the volunteer) have read the **Code of Conduct – Coaches & Teachers** & Discipline Policy & Procedure

☐ I confirm I (the Volunteer) have read the **Code of Conduct – Volunteers** & Discipline Policy & Procedure

Signature

Date