AMATEUR SWIMMING ASSOCIATION OF JAMAICA MEMBER REGISTRATION FORM - YEAR **2015**

New Registration: Applicant Details:	Renewal: 🗖	Transfer: 🖵	One Day: 🖵
NAME: SURNAME:		FIRST	
MIDDLE	PREFERRED		M/F
D-O-B: ddmm	yy CITIZENSHIP		
CLUB:	OTHER	FEDERATION AFFI	L (if any):
TEL: HOMECE	LLEM/	AIL	
MEMBERSHIP: (Select all a	oplicable categories) Inc	clude me on the A	SAJ email distribution list 🛛
General Membership	Athlete 🖵 Coach	Technical (Offical 🗖
Swimming Synchro	nized Swimming	Water Polo 🚨	Masters Swimming
If applicant is under 18 years	old, please provide details	for at least one of t	he follow persons: (one MUST sign);
1. FATHER/GUARDIAN			
TEL#: HOME	WORK	CELL	
EMAIL		SIGN	
2. MOTHER/GUARDIAN			
TEL#: HOMEV	/ORKC	CELL	
EMAIL		SIGN	
Please include the Parents/Gu	ardians on the ASAJ news e	mail distribution list	:: YES: NO: (circle)
FEE), if paid before January	31 st each year or JA\$2,50	0.00 after January	700.00 ("EARLY BIRD" REGISTRATION 7 31 st each year. <u>If Fee is paid after</u> 8 for all categories of \$1,500.00
ALL COACHES - JA\$2,500.00 p SWIM JUDGES/SYNCHRO/WA MASTERS SWIMMERS SINGLE	TER POLO TECHNICAL OFFIC		
SIGNED: (Applicant over 18 or	Club Official)		
Note 1: This Application is no Note 2: Proof of Age & Citize Note 3: All Coaches must pro	nship is required for All Swi	mmers and those T	echnical Officials officiating overseas.
Office Use Only: Fee Paid	: Checked by	: Ent	ered by:

Form - ASAJREG09

Form updated: November 15, 2013