

STROUD MASTERS SWIMMING CLUB

"Swimming in the five valleys"



www.stroudmasters.org

Membership Form/Prospective Member Membership Form 2025

Full Name:	Date of Birth:
Address:	Tel Number:
	Mobile No:
E-mail address:	
Next of Kin:	Relationship:
Contact number:	
Emergency Contact Name:	
Contact number:	
Where possible, a 2 nd point of contact details	
British Swimming Registration Number (if known):	
British Swimming Category: Cat. 1. (non-competitive) <input type="checkbox"/> , Cat 2. (competitive) <input type="checkbox"/> , Cat 3. (volunteer) <input type="checkbox"/>	
Please tick the most relevant box.	
Are there any medical, medication or disabilities that you should inform us of?	
Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please detail:	
Are you a member of any another swimming club?	
Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, name of club(s):	
If approved to be a member, will Stroud Masters Swimming Club be your 'First Claim' club? Yes <input type="checkbox"/> No <input type="checkbox"/>	
<ol style="list-style-type: none"> 1) I certify that I am physically fit and able to participate fully in Stroud Masters Swimming Club training sessions and have not been advised otherwise by a medical advisor, and, 2) I have declared all medical conditions/medication/disabilities, and, 3) I can swim 100 metres unaided. 4) I acknowledge receipt of the rules of Stroud Masters Swimming Club and confirm my understanding and acceptance that such rules (as amended from time to time) shall govern my membership of the Club. I further acknowledge and accept the responsibilities of membership upon members as set out in these rules. 5) If approved for membership, I further acknowledge and accept the responsibilities of membership upon members as set out in these rules. 	
<p>If applying for club membership please tick here <input type="checkbox"/>, and present completed application form, together with the annual membership payment of £50 to the Treasurer or Membership Secretary.</p> <p>If you are a prospective member (a guest) please tick here <input type="checkbox"/>. If you subsequently decide you wish to proceed and become a paid-up member of our club, we just need you to pay the annual membership of £50.</p> <p>If you are a member of Aquatics GB, Swim England, Scottish Swimming or Swim Wales, you will receive a discount as detailed in our Constitution.</p>	
SIGNED:	DATE:

Details of our sessions can be found at stroudmasters.org/training/sessions.

Official use only

Membership form completed and signed by applicant: <input type="checkbox"/>	Membership accepted and new member added in OMS: <input type="checkbox"/>
Membership payment received: <input type="checkbox"/>	
Date:	Sum paid:
Committee member (print name)	Signed: