

CLUB: JAMBOREE HEIGHTS SWIMMING CLUB, INC    WEB: [www.jhswimclub.com](http://www.jhswimclub.com)    SEASON: 2011 / 2012

Renewal    New Member    Upgrade    Transfer   Previous Club \_\_\_\_\_

PERSONAL INFORMATION (\*compulsory information for members)    Title\* Circle:   Dr   Mr   Mrs   Ms   Miss   Master

First Name\* \_\_\_\_\_ Middle Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_

Address\* \_\_\_\_\_

Suburb\* \_\_\_\_\_ State\* \_\_\_\_\_ Postcode\* \_\_\_\_\_

Date of Birth\* \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yyyy)   Gender\*    Male    Female   Birth Certificate Sighted    Yes    No

Business (\_\_\_\_) \_\_\_\_\_ Private (\_\_\_\_) \_\_\_\_\_ Mobile \_\_\_\_\_

Email Address\* \_\_\_\_\_ Format:    HTML    Plain Text

\*At Least One Telephone Contact Number Must Be Entered

Emergency Contact Person\* \_\_\_\_\_ OCCUPATION\* \_\_\_\_\_

Emergency Contact Number\* \_\_\_\_\_

**Membership Subscription Type\***

**Competitive Swimmer:** A member who competes against members of other clubs.

1<sup>st</sup> or 2<sup>nd</sup> Family Member      3<sup>rd</sup> Family Member      4<sup>th</sup> Family Member  

**Recreational Swimmer:** A member who swims within club only, i.e: does not compete against members of other clubs.

1<sup>st</sup> or 2<sup>nd</sup> Family Member      3<sup>rd</sup> Family Member      4<sup>th</sup> Family Member  

Non – Swimmer:    (All other members e.g. Club Committee members who are not the parents/guardians of a swimming member, etc)

Parent Member:    ( The parent or guardian of a swimming member.)

Coach:    (This membership is for qualified Coaches who are members of ASCTA.)

Technical Official:    ( To be eligible for this category you need to hold at least one SAL Technical Official qualification.)

Life Member Club:      Life Member Region:      Life Member State:  

I would like to receive:    Swimming Queensland's Q-Swimmer (Free)

**National Custom Fields:**

Alternate Email Address: \_\_\_\_\_

Alternate Address (including Suburb, State & PC): \_\_\_\_\_

Medical Conditions / Allergies / Vaccinations: \_\_\_\_\_

If a SWD member, what are your classifications: \_\_\_\_\_

Do you belong to another Swimming Federation: \_\_\_\_\_

Australian Citizen?    Yes    No   Asthmatic?    Yes    No   Indigenous Member?    Yes    No

If not born in Australia has Club sighted your Australian Citizenship?    Yes    No

## DECLARATION 1

**Title:** Conditions of being a Member of Swimming Queensland, Affiliated Regions and Affiliated Clubs

- Declaration:**
1. I agree to abide by the rules, regulations and policies of Swimming Queensland, Swimming Australia, the relevant Regional Swimming Association and the relevant club, including Swimming Australia's Anti-Doping, Member Welfare and Privacy Policies (these are available at [www.swimming.org.au](http://www.swimming.org.au)).
  2. I authorise Swimming Queensland to use and disclose, to related and relevant bodies, any of my personal information that may be necessary to implement the rules, regulations and policies in 1 above. I agree to have my name and results published in official programs, newsletters and websites.
  3. I note that the club, as an affiliate of Swimming Queensland, has \$20 million public liability insurance cover.
  4. I warrant that all information provided is true and accurate.

**Confirmation:**  I have read, understood, acknowledge and agree to the above declaration.

## DECLARATION 2

**Title:** Parent/Legal Guardian Consent (in respect to an applicant under the age of 18 years)

- Declaration:**
1. Where the applicant is under 18 years of age this form must be endorsed by the applicant's parent or legal guardian.
  2. I have read, understood, acknowledge and agree to the declarations above and I warrant that all information provided is true and correct.
  3. I, as the Parent or Guardian of the applicant, expressly agree to accept responsibility for the applicant's behavior and agree to personally accept the conditions set out in the membership application and declaration.

**Confirmation:**  I have read, understood, acknowledge and agree to the above declaration.

Signature (Member) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

If under 18 Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### Payment Options

EFT  Cheque  Cash (at SIGN ON ONLY)

A copy of the Electronic Funds Transfer receipt **MUST** be brought to SIGN ON for proof of payment or you will be charged the after sign-on fee.

If posting, forms & payment receipt or cheque **MUST** be received **PRIOR** to Sign-on.

**PLEASE NOTE: Membership & Squad fees MUST be paid before training can commence. NO CASH... NO SPLASH!!!**

### Membership fees

1 swimmer \$143 (after sign-on \$168)  
2 swimmers \$266 (after sign-on \$311)  
3 swimmers \$354 (after sign-on \$409)  
4 swimmers \$417 (after sign-on \$482)

**AND \$30 family participation levy**

### ELECTRONIC FUNDS TRANSFER:

Jamboree Heights Swimming Club, Inc,  
Bank of Queensland Middle Park **Account No:** 20940607 **BSB:** 124-001

Proof of EFT must be emailed to: [treasurer@jhsclub.com](mailto:treasurer@jhsclub.com)

**CHEQUE:** made payable to *Jamboree Heights Swimming Club, Inc* and placed in the post box located at the pool or mailed to: Treasurer, Jamboree Heights Swimming Club Inc, PO Box 287, Mt Ommaney 4074

**CASH:** at sign-on **ONLY**

**\*PLEASE NOTE:** A signed membership form is required for each member & parent who will then be covered by insurance when volunteering.

For **SQUAD** information, please contact: [squadmanager@jhsclub.com](mailto:squadmanager@jhsclub.com)

### CLUB USE ONLY:

Receipt Number: .....

Amount Paid: .....

No. of swimmers: .....

Signature: .....

Date: .....