



APPLICATION FOR 2012 MEMBERSHIP - OVER 18s ONLY

SECTION 1

PLEASE USE BLOCK CAPITALS WHEN COMPLETING DETAILS ON THIS FORM. ALL FIELDS MUST BE COMPLETED

<u>Member Contact Details</u>	
Full Name	Date of Birth
Address	
Post Code	
Telephone No:	Email
<u>Emergency Contact Details</u>	
Full Name	Date of Birth
Address if different to above	
Post Code	
Telephone No:	Email

Membership required - please tick appropriate box:

Standard MEMBERSHIP £20.00
Standard membership

Racing MEMBERSHIP £50.00
Membership includes Henley Mile entry (£5 discount)

Voluntary donation to club funds £.....

Current membership	ASA or B.T.F Registration	ASA / B.T.F Number
<i>List any existing club membership</i>	<i>Confirm either ASA or BTF if applicable</i>	<i>Provide your ASA or BTF Membership No.</i>

For the safety and benefit of swimmers, and so that your membership application can be considered by the committee, it is important that section 2 of this form is completed. Any information given will be treated confidentially and will be restricted to the club Committee on a need to know basis.

If you require any further information or help in completing this form please ask Tom Kean on Tomkean@thamesidewealth.com

On completion of this form please return to Tom Kean at Malvern Cottage, Brook Street, Kingston Blount, Oxon, OX39 4RZ, enclosing a cheque for your membership payable to HOWSC. If your application is refused by the committee you will be notified in writing the reasons why and your cheque will be returned to you. Alternatively you can make a bank transfer. In the first instance, please email this form to Tomkean@thamesidewealth.com and await instruction on account details.

I acknowledge receipt of the constitution and rules of Henley Open Water 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 the constitution.

I DECLARE THAT THE INFORMATION CONTAINED WITHIN THIS FORM IS TRUE

SIGNED

Date.....

Completed Membership Forms and Fees to be returned to **Tom Kean at Malvern Cottage, Brook Street, Kingston Blount, Oxon, OX39 4RZ.**

SECTION 2

For your application to be considered all parts of this section must be completed

Part 1 - Open water ability – Please list below open water events you have completed within the last 12 months along with finishing times either official or estimated. If you have no open water experience, please complete just part 2.

<i>Event name</i>	<i>Date</i>	<i>Distance</i>	<i>Time</i>

Part 2 – Swimming ability – Please list below distances you have covered in a swimming pool within the last 12 months, official or estimated time to complete and which stroke.

<i>Distance</i>	<i>Time</i>	<i>Stoke (back/front crawl/breast stroke)</i>

Office use only

Membership approved Y/N	Date Received	Membership number	Total Paid	Payment method/cheque no

If membership refused please give reasons below

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