

JERSEY SWIMMING CLUB

JUNIOR MEMBER APPLICATION FORM

(UNDER 18) 2025



Welcome to Jersey Swimming Club. To ensure that the club has your child's correct contact details please complete this form and return it to the Club Administrator. If you are under 18 please ask your parent or guardian to sign this form. Club coaches need to know this information to ensure the safety and well-being of all children attending sessions.

Swimmer's Name	
Swimmer's DOB	
Gender – Female/Open	
Address	
Home telephone number	
Mobile number*	
Email address*	
Emergency Contact Name	
Emergency Contact Number	
Second Emergency Contact Name	
Second Emergency Contact Number	
Details of any known medical conditions special/ dietary requirement/allergies/disability	

* Mobile numbers and email addresses provided should be those of the parent or guardian.

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Parent/Guardian Statement

I will inform the club coach of any important changes to my child's health, medication or needs and of any changes to our address or contact telephone numbers provided. Having parental responsibility for the above-named child I give permission for medical treatment to be administered by a nominated first aider or qualified medical practitioner in the event of illness, accident or injury. I understand in the event of illness, accident, or injury all reasonable steps will be taken to contact me.

Code of Conduct

I confirm that I have read and agree to abide by the code of conducts and the club policies. I acknowledge receipt of the rules of Jersey 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.

Photography Consent

The Jersey Swimming Club requires parental consent to take and use all photographs and may wish to take photographs of individuals and/or groups of swimmers under the age of 18 that may include your child during their membership of the club. All photographs will be taken and published in line with Swim England Photography Policy. I can confirm I have read and completed the Photography Consent Form after reading Swim England Jersey Swimming Club Photography Policy.

I can confirm I have read all the above and completed all the relevant forms mentioned.

Parent/Guardian Signature	
Print Name	
Swimmer signature and Print (Over 13)	
Date	