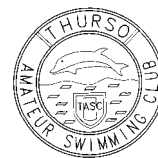


# Thurso Amateur Swimming Club

## Update of information



The following information is private & confidential

MEMBER'S DETAILS		PARENT GUARDIAN DETAILS (Member under 16 years)	
Forename		Forename	
Surname		Surname	
Middle Initials		Initials	
Address		Address <i>If different</i>	
Post code		Postcode	
Phone No		Phone No	
E-mail		E-mail	
DOB			
Country of Birth			
<b>MEDICAL DECLARATION</b>			
Swimming Members only - Please advise any relevant medical conditions, allergies, prescribed medication and dietary or nutritional supplements			
Medical condition (s)			
Allergies			
Regular Medication			
Dietary Supplements			
Notes			
Parent/Guardian/Master May we contact you in the future if we require any help With the running of the club? (See information booklet). Please indicate any areas that you may be interested in Helping the club with or state where else you feel you could Help us with.		<b>Yes</b>	<b>No</b>
Signature (Parent/Guardian if member under 16)		Poolside helper      Fundraising      Timekeeping/Officials  Coaching      Any other areas within the club	
Date			

### NOTES

TASC utilise a computerised membership & waiting list recording system for ease of update. If applicant or applicant's parent/guardian has any objection to this arrangement please notify the Membership Secretary.