

BERMUDA AMATEUR SWIMMING ASSOCIATION

SWIMMER REGISTRATION 2015-2016

Registration Fee: \$110.00

(*after September 30th, 2015 \$120.00 for previous members' renewals)

Swimmer's Name: _____

Surname First Name Middle Initial

Date of Birth: ____/____/____ Male / Female Indicate if New Registration: Yes / No

Day Month Year (circle one) (circle one)

Club: _____ Have you changed your Club Since your last Registration? Yes/ No
(circle one)

Correct Mailing Address: _____

_____ Postal Code: _____

Mother's Name: _____ Home Tel. # : _____ Cell # : _____

Father's Name: _____ Home Tel. # : _____ Cell # : _____

PRIMARY Email address (**FOR ALL BASA CORRESPONDENCE**): _____

SECONDARY Email address: _____

CONDITION OF MEMBERSHIP:

As a condition of membership, the swimmer agrees to abide by the rules of the sport including the BASA Code of Conduct. One of these rules is participation without the use of substances or methods identified in the Bermuda Drug Council full list of banned and restricted doping classes and methods. If the swimmer is under 18 years of age, the parents/guardians similarly agree to abide by the BASA Code of Conduct. Further, the parents/guardians recognize that BASA is a volunteer-staffed charitable organization, whose primary goal is to provide a safe, enjoyable environment in which swimmers can develop their swimming skills to the best of their abilities. The role of the parents/guardians is critical in the success of BASA programmes. Therefore, it is imperative that parents/guardians work in conjunction with the swimmer's club to become involved with volunteering for but not limited to, fund raising and other social events, officiating and learning to officiate at swim meets.

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Signature of Swimmer

Signature of Parent or Guardian

WAIVER:

In consideration of your acceptance of this registration, we the parents / guardians of the undersigned age group swimmer, who is under 18 years of age, hereby waive and release any and all rights and claims for damages, howsoever arising, we may have against Bermuda Amateur Swimmers Association, the Directors and its staff. The swimmer is of sound mental health, physical health and capable of participating in the swim program. In the event of injury or sickness, Bermuda Amateur Swimming Association has my permission to arrange for medical care.

Signature of Parent or Guardian Date:

Your current B.A.S.A. swimmer registration expired on August 31st, 2015. ALL SWIMMERS MUST BE REGISTERED BEFORE THEY ARE PERMITTED TO SWIM IN ANY B.A.S.A RECOGNISED MEET. Complete and sign the above form; incomplete forms will not be processed for membership. Payment is due with the submission of this form. Thank you

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NOTE: BASA registered members and, if they are under 18 years of age, their parents and guardians, must abide by the BASA policies and procedures, which can be found on the BASA website, www.basa.bm