

INTERSTATE TRANSFER

Swimmers wishing to transfer interstate membership to Swimming WA should use this form. It is the responsibility of the member to fully complete Section A and to ensure their current club completes Section B and the proposed club completes Section C.

Please send the completed form to:
SWA Membership Officer
membership@wa.swimming.org.au

SECTION A: Member to complete

NAME

DOB

ADDRESS

EMAIL

PHONE

PRESENT CLUB

PROPOSED CLUB

MEMBERSHIP TYPE

SWIMMER

COACH

TECHNICAL OFFICIAL

COMMITTEE MEMBER

SECTION B: Current club to complete

The current club agrees that the member in Section A has no financial obligation to the club and is free to transfer to the club of their choice.

NAME

POSITION

SIGNED

DATE

SECTION C: Proposed club to complete

I certify that the proposed club is prepared to accept the member in Section A as a financial member of the club.

NAME

POSITION

SIGNED

DATE



PRINCIPAL PARTNER

HANCOCK PROSPECTING