

## Application for Transfer

Registered SWA Members wishing to transfer first claim membership should use this form. It is the responsibility of the Member or the Parent/Guardian to fully complete Section A and B, to ensure their current Club completes Section C and the proposed Club completes Section D.

Please send the completed form to:  
Swimming WA  
PO Box 205  
Leederville WA 6903

Scan & Email to:  
**membership@wa.swimming.org.au**

Payment can be made via Direct Debit to:  
Swimming WA      Westpac Bank  
BSB #: 036-022      Account #: 386308  
Reference: 'Surname & Transfer'  
**Funds will be held pending approval**

### **SECTION A: Member to complete**

**NAME:** \_\_\_\_\_ **DOB:**    /    /      **AGE:** \_\_\_\_\_ **M / F**

**If the transferring Member is under 18 years of age, their Parent/Guardian is required to complete Section B of this form.**

**No transfer of a child under the age of 18 will be processed unless Section B is complete.**

**ADDRESS:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**PARENT/GUARDIAN:** \_\_\_\_\_

**PRESENT CLUB:** \_\_\_\_\_

**PROPOSED CLUB:** \_\_\_\_\_

**The application is for an Annual, Junior, General and Seasonal - accompanied by the transfer fee of \$35.00**

**The application is for a Junior Dolphins Member, Club Committee Member, Coach, Technical Official or Parent/Guardian Member and does not attract a transfer fee.**  
(Please place an X in the box that reflects your intent)

**\*For interstate transfers, please use the Interstate Transfer form.**

**Reason for transfer request:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **Terms & Conditions**

- Only one (1) transfer between Swimming WA Clubs per calendar year is permitted.
- Clauses 6.3.48-6.3.54 of the Swimming WA By-Laws and Policies articulate the intent of a transfer is to **NOT** foster an environment whereby the principle promotes the adhoc and reactive switch between Clubs. To this end, transfers are not effective until approved by the Swimming WA Membership & Development Manager.
- If the Transfer is denied, the Transfer fee will be refunded. Please ensure you have provided a legible email address to enable contact.
- Swimmers will swim 'Unattached' at Meets for the first thirty (30) days after approval of transfer. Should the 'Unattached' period cease between the date of closure of entries to a swim Meet and the commencement of that swim Meet, the swimmer will still be classified as swimming 'Unattached' and unable to compete in Club relays for their new Club.

## Application for Transfer

I have read the Terms & Conditions of this transfer and the Swimming WA By-Laws and Policies and will abide by any condition/s that result from this application:

NAME: \_\_\_\_\_ M/SHIP #: \_\_\_\_\_

SIGN: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ M/SHIP #: \_\_\_\_\_

SIGN: \_\_\_\_\_ DATE: \_\_\_\_\_

### **SECTION B: Parent/Guardian contact information- If Member is under 18 please complete**

PARENT/GUARDIAN NAME: \_\_\_\_\_ DOB:     /     /

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

PRESENT CLUB: \_\_\_\_\_

PROPOSED CLUB: \_\_\_\_\_

I will be transferring with my child

I will NOT be transferring with my child. Their Parent/Guardian at proposed Club will be

NAME: \_\_\_\_\_ M/SHIP #: \_\_\_\_\_

SIGN: \_\_\_\_\_ DATE: \_\_\_\_\_

## Application for Transfer

### **SECTION C: (Current Club to complete)**

\_\_\_\_\_ has no financial obligations to \_\_\_\_\_ and is free to transfer to the Club of their choice. (Additional comments on circumstances around this transfer can be provided overleaf). **By signing below, you are agreeing that if the Member is under the age of 18, their Parent/Guardian also has no financial obligation to your Club.**

NAME: \_\_\_\_\_ (Club President/Secretary/Registrar)  
(circle relevant title)

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### **SECTION D: (Proposed Club to complete)**

I hereby certify that (subject to the approval of SwimmingWA) the \_\_\_\_\_ Swimming Club is prepared to accept him/her as a financial member of this Club. **By signing below, you are agreeing that if the Member is under the age of 18, you also accept their parent/guardian into your Club.**

NAME: \_\_\_\_\_ (Club President/Secretary/Registrar)  
(circle relevant title)

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Additional Club or Member comments with this transfer request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Application for Transfer

**SECTION E: (Swimming WA approval / denial)**

Swimming WA approves the transfer request of this individual as evident by the signatures below.

Approved

Approved with  
conditions (see  
below)

Denied

SIGNED: \_\_\_\_\_ Grace Schmidt  
(Membership Officer)

DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

SIGNED: \_\_\_\_\_ Kirsty Read  
(Membership & Development Manager)

DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

DATABASE UPDATED & COMPLETED BY: \_\_\_\_\_

DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Conditions attached to this approved transfer: (Office use only)

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