

## Application for First and Second Claim Membership

Registered SWA Members wishing to hold First and Second Claim Memberships **must** complete this form. It is the responsibility of the Member or the Parent/Guardian to fully complete Section A and to ensure their First Claim Club completes Section B and the Second Claim Club completes Section C.

Please scan and email the completed form to: <a href="mailto:membership@wa.swimming.org.au">membership@wa.swimming.org.au</a>

\* This form is not to be used if you are transferring from one club to another\*

ECTION A: Member to complete					
AME:	_ DOB:	_ /	_ /	AGE:	M / F
DDRESS:					, ,
MAIL:		_ PHO	NE:		
ARENT / GUARDIAN:					
IRST CLAIM CLUB:					
ECOND CLAIM CLUB:					
<ul> <li>Please note a Second Claim Me</li> <li>The \$44.00 application fee will be</li> </ul>	 				·
Date payment was made://(DD) (MM					
eason for Second Claim Club Applic					

## Terms & Conditions (See clause 7 in the Membership Policy)

- 7.1. First and Second Claim Club Membership
- (a) A natural person must be an Individual Member of only one Member Club (First Claim Membership) unless they receive approval to be a Member of a second Member Club in accordance with this section.
- (b) A natural person may not be a Member of more than two Member Clubs.
- (c) A natural person may be a Member of second Member Club (Second Claim Membership) if they receive approval from the CEO based on the following criteria:
  - They are a member of a First Claim Member Club which is located close to their principal place of residence (being where they spend most time overnight)
  - They are unable to attend training with their First Claim Member Club because of reasons which could include: – School or work requirements, – The first Claim Clubs training program is interrupted, e.g. temporarily pool shutdowns or resignation of coach
  - The First and Second Claim Clubs provide consent, which shall not be unreasonably withheld.
- (d) A natural person may only retain as Second Claim Membership as longer as the circumstances which justified this Second Claim Membership continue, and must advise the CEO of any such change.



NAME:	M/SHIP #:
SIGN:	DATE:
	M/SHIP #:
SIGN:	DATE:
•	
and us.	(Club Procident/Constant/Posictor)
NAME:	(Club President/Secretary/Registrar) (circle relevant title)
SIGNED:	DATE://
SECTION C: (Second Claim Members	ship Club to complete)
I hereby certify that (subject to the ap Swimming Club is prepared to accept their First Claim Club unless requeste	ship Club to complete)  oproval of Swimming WA) the t him/her as a Second Claim Member. The swimmer will represented before each separate meet and SWA and the First Claim Club
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