## **Application for Club 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. For interstate transfers please use the "Interstate Transfer Application Form".

Please scan and email the completed form to membership@wa.swimming.org.au for processing.

Some club transfers attract a \$25.00 transfer fee (see Section A for details). Payment of the transfer fee can be made via direct debit to the following account:

#### Swimming WA

#### **BSB: 036 022** Account: 386308

#### Reference: "Surname & Transfer"

Applications for transfer will not be approved until the transfer fee is received. Funds will be held pending approval.

NAME:		DOB:	1	1
	ng Member is under 18 years of age, their Parent/Gua r the age of 18 will be processed unless Section B is		ction B of this	s form. No transfei
ADDRESS:				
EMAIL:		PHONE:		
PARENT/GU/	ARDIAN:			
	_UB:			
	CLUB:			
	The application is for an Annual, Junior, Gen of \$25.00	eral and Seasonal - accomp	anied by th	ne <u>transfer fee</u>
	The application is for a Junior Dolphins Mem Official or Parent/Guardian Member and does		er, Coach, ⊺	Technical
Reasor	n 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 <u>NOT</u> 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.



## **Application for Club 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:			····			
SIGN:	_ DATE:					
PARENT/GUARDIAN						
SIGN:	DATE:					
SECTION B: Parent/Guardian contact information- If Member is under 18 please complete						
PARENT/GUARDIAN NAME:	DOI	B: <u>/</u>	1			
EMAIL:						
PRESENT CLUB:						
PROPOSED CLUB:						
I will be transferring with my child						
I will NOT be transferring with my child. Th	neir Parent/Guardian at ∣	proposed Club	will be:			
NAME:						
SIGN:	DATE:					



# Application for Club Transfer

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

	has no financial obligations to			
Swimming Club 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)			
Swimming Club is prepared to a agreeing that if the Member is u	the approval of SwimmingWA) the accept them as a financial member of this Club. By signing below, you are inder 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 co	mments with this transfer request:			

