

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: membership@wa.swimming.org.au

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

SECTION A: Member to complete

NAME: _____ DOB: ____ / ____ / ____ AGE: _____ M / F
(circle)

ADDRESS: _____

EMAIL: _____ PHONE: _____

PARENT / GUARDIAN: _____

FIRST CLAIM CLUB: _____

SECOND CLAIM CLUB: _____

The application is for an Annual, Seasonal and Junior Member accompanied by the Membership fee of \$44.00

The application is for a Junior Dolphin Member and does not attract a fee.

Payment can be made via Direct Debit to:
 Swimming WA Westpac Bank
 BSB# 036-022 Account# 386308
 Ref: 'Your Surname & SCM'
Funds will be held pending approval from SWA

Date payment was made: ____ / ____ / 20____
 (DD) (MM) (YY)

Reason for Second Claim Club Application: _____

Terms & Conditions (See clause 6.3.20 of Swimming WA By-Laws and Board Policies)

- Swimmer's may belong to a maximum of two (2) Clubs in one (1) season (October – September)
- Eligibility of Second Claim Membership is for Country and Metro swimmer's being educated at Schools, Colleges, Universities, School of Mines, Agricultural Colleges or similar, who are temporarily away from their principal place of residence.
- The swimmer must nominate his or her "First Claim Club" when completing his or her Annual registration with Swimming WA. This form must then be completed if you wish to hold a Second Claim membership. The applications are not effective until approved by the Swimming WA Club Services Coordinator and GM Performance & People.
- The swimmer shall pay Swimming WA his or her Annual SWA fee, and a Second Claim Membership fee of \$44
- If the application for Second Claim membership is denied, the application fee will be refunded. Please ensure you have provided a legible email address to enable contact.
- Swimmer's will represent their home club in competitions unless otherwise stated using the 'Second Claim Club Competition Form'.

I have read the Terms & Conditions of this request 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: (First Claim Membership Club to complete)

_____ Is eligible to have a Second Claim Membership, and will represent our club at competitions unless otherwise requested by the member and approved by SWA and us. (Additional comments on circumstances around this transfer can be provided overleaf).

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

SIGNED: _____ DATE: ____/____/____

SECTION C: (Second Claim Membership Club to complete)

I hereby certify that (subject to the approval of Swimming WA) the _____ Swimming Club is prepared to accept him/her as a Second Claim Member. The swimmer will represent their First Claim Club unless requested using the "Second Claim Club Competition Form" before each separate meet and SWA and the First Claim Club have approved it.

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

SIGNED: _____ DATE: ____/____/____

Additional Club or Member comments with this request:

SECTION D (Swimming WA approval / denial)

Swimming WA approves the First and Second Claim Membership request of this individual as evident by the signatures below.

Approved

Approved with
conditions (see below)

Denied

SIGNED: _____ Grace Schmidt
(Membership & Development Manager)

DATE: ____ / ____ / ____

SIGNED: _____ Kirsty Read
(Membership & Development Manager)

DATE: ____ / ____ / ____

DATABASE UPDATED & COMPLETED BY: _____

DATE: ____ / ____ / ____

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