

Bishop's Waltham Community Swimming
Membership Application Form 2019 / 20

Membership Number:
(Office Use Only)

Annual Membership (swim as often as you wish without further payment)
Membership is from 1st September 2019 to 31st August 2020 (Term time only)
Half Year is up to February half term and then from February half term

- | | | |
|-------------------------------------|--|--------------------------|
| Adult (over 18) | 1 year all inclusive membership subscription of £130 | <input type="checkbox"/> |
| | Half year all inclusive membership subscription of £70 | <input type="checkbox"/> |
| Child (under 18) | 1 year all inclusive membership subscription of £80 | <input type="checkbox"/> |
| | Half year all inclusive membership subscription of £50 | <input type="checkbox"/> |
| Family | | |
| (1 adult with 1 child) | 1 Year all inclusive membership subscription of £175 | <input type="checkbox"/> |
| | Half year all-inclusive membership subscription £95 | <input type="checkbox"/> |
| (1 adult with 2 + children) | 1 Year all inclusive membership subscription of £220 | <input type="checkbox"/> |
| | Half year all inclusive membership subscription £120 | <input type="checkbox"/> |
| (2 adults with 2 + children) | 1 Year all-inclusive membership subscription £345 | <input type="checkbox"/> |
| | Half year all-inclusive membership subscription £180 | <input type="checkbox"/> |

Those choosing the 1 Year Membership joining after September, but with more than 6 months of the year left will be charged pro-rata per month of the yearly rate. Anyone joining with less than 6 months of the year left will be charged pro rata per month of the 6 month rate. Non member adults will be charged £4.00 per swimming session, children (5 -18 years) £3.40 per session, children under 5 years £1 per session.

Names: 1 _____ 2 _____
3 _____ 4 _____
5 _____ 6 _____

Address: _____
_____ **Post Code:** _____

Tel.: _____ **Amount Paid:** _____ **Cash / Cheque (payable to BWCS)**

For payments by BACS: Account Number: 11136706 Sort Code: 09 01 55
Please ensure correct reference: BWCS Initial and Surname (For example: BWCS A Smith)

Email: _____ **(Please print clearly)**

Signed: _____ **Date:** _____

Please return this form with payment or having paid BACS to a session Lifeguard at the pool or the school office marked for the attention of BWCS Treasurer. Thank you. Your membership card will be left for collection at the pool unless you enclose a SAE.

Your Data and Privacy

Your privacy is important to us. For more details about how we use your personal data, please read our Privacy Statement. This is available to view at bwcommunityswimming.org.uk/GDPR

By signing up to membership, you agree for us to send information to you regarding your current membership. This will include contacting you regarding pool information, such as pool closures, events and any relevant updates.

We would also like to send you additional information that is relevant to you. By ticking the boxes you consent to receive our newsletter and other email communications from us about our services, and promotional activities (including membership information for the following year),

by post , **by email** , **by telephone** , **by text message**

We will not share your details with any third party organisations. You may opt out of receiving our communications at any time by emailing bwcommunityswimming@gmail.com