



Swanley and District Athletic Club Application for Membership

Welcome to Swanley & District AC – to ensure we have the correct details for you, please fill out the form clearly and return to either one of our coaches or one of the committee members.

Section A: Athlete Details

First Name(s) _____ Surname _____

Address (in full) _____

Postcode _____

Phone _____ Mobile _____

Email* _____

Date of Birth _____ Place of Birth _____

If you were born in another county (ie: Surrey) how long have you resided in Kent? _____

Are you a member/past member of any other Athletic Club? If yes, please can you provide the following information (if none please write "None"):

Name of Club _____ Date resigned (if applicable) _____

EA URN No. (if known) _____

Section B: Additional Support

Please detail below any disability you have and/or any additional support you may require from our club coaches:

Section C: Medical Information

Please detail any medical conditions /allergies/medication that our coaches should be aware of or that you feel we should know about in case of emergencies. Please do not leave blank – if there is no information, please write "None":



I consent to my special category personal data provided in section B and C to be shared with the club coaches for the purposes of the delivery of my safe participation in club activities.
This data provided will not be shared or processed for any other purpose.

Section D: Emergency Contact details

Emergency contact 1 – Name: _____ Phone No. _____

Emergency contact 2 – Name: _____ Phone No. _____

Section E: Club Privacy Statement & Communication preferences

Swanley & District AC take the protection of the data that we hold about you as a member seriously and will do everything possible to ensure that data is collected, stored, processed, maintained, cleansed and retained in accordance with current and future UK data protection legislation.

Please read the full privacy notice carefully to see how The Club will treat the personal information that you provide to us. We will take reasonable care to keep your information secure and to prevent any unauthorised access.

Section F: Athlete Agreement

Membership class:

Adult 1st Claim Adult 2nd

Please note each member of the family must fill out a separate membership form.

I confirm that the information provided above is complete and true to the best of my knowledge and I am willing to abide by the constitution and rules/code of conduct for athletes of Swanley & District AC (available on request) and the UK governing body for athletics. I confirm that I have read and understood the privacy statement and how data will be used and shared.

Signed: _____

Print name: _____ Date: _____

For use By Swanley & District AC only

Subscription enclosed: £ _____ Date Elected: _____ EA URN: _____

Proposer: _____ Seconder: _____



Annual Subscription Rates

Membership fees are due on the 1st April each year.

Membership class	Full year
Adult 1 st Claim	£25.00
Adult 2 nd Claim	£20.00
Family (2 Adults)	£45.00
Honorary	Free

EA membership not included.
The 2024 EA fee is £19 per athlete.

On completion of this form please send to:

The Membership Secretary
Email to: sdacteam@gmail.com
Swanley and District AC, New Barn Road, Swanley BR8 7PW

Payment can be made by:

BACS: Unity Trust Bank Sort Code: 60-83-01, Account Number: 20405737.

Please include your name as a reference so that we know who has paid.

CASH: The Treasurer is usually at Wednesday night training so please hand to him/her personally

