

PLEASE PRINT CLEARLY WITH A PEN

AMATEUR SWIMMING ASSOCIATION OF JAMAICA

MEMBER REGISTRATION FORM - YEAR _____

New Registration: Renewal: Transfer:

Applicant Details:

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|--|
| NAME: SURNAME: _____ FIRST _____ |
| MIDDLE _____ PREFERRED _____ M/F _____ |
| D-O-B: dd _____ mm _____ yy _____ CITIZENSHIP _____ |
| CLUB: _____ OTHER FEDERATION AFFIL (if any): _____ |
| TEL: HOME _____ CELL _____ EMAIL _____ |
| MEMBERSHIP: (Select all applicable categories) Include me on the ASAJ email distribution list <input type="checkbox"/> |
| General Membership <input type="checkbox"/> Athlete <input type="checkbox"/> Coach <input type="checkbox"/> Technical Official <input type="checkbox"/> |
| Swimming <input type="checkbox"/> Synchronized Swimming <input type="checkbox"/> Water Polo <input type="checkbox"/> Masters Swimming <input type="checkbox"/> |

If applicant is under 18 years old, please provide details for at least one of the follow persons (one must sign);

1. FATHER/GUARDIAN _____

TEL#: HOME _____ WORK _____ CELL _____

EMAIL _____ SIGN _____

2. MOTHER/GUARDIAN _____

TEL#: HOME _____ WORK _____ CELL _____

EMAIL _____ SIGN _____

Please include the Parents/Guardian on the ASAJ news email distribution list: YES | NO (circle)

REGISTRATION FEES:

NEW REGISTRATION: JA\$1,000 SWIMMER ANNUAL RENEWAL FEE: JA\$750 OR JA\$1,000 after JAN 31

COACH REGISTRATION FEE: JA\$500 ALL OTHERS: JA\$500

SIGNED (Applicant over 18 or Club Official): _____ DATE _____ 20____

Note 1: This application is not complete without the applicable fee and proof of age (when required).

Note 2: Proof of age & citizenship is required for All Swimmers and those Technical Officials officiating overseas.

Note 2: Coaches must provide copies of a valid Life Guard Certificate and NEPA License.

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|--|
| Office Use Only: Fee Paid: _____ Checked by: _____ Entered by: _____ |
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