

Please complete this form, scan and forward via email to the Immanuel Piranhas Membership Officer at <u>membership.ipiranhas@gmail.com</u>

# Do not enclose payment with this form, please complete ALL fields for swimmer and parent.

All applications are subject to approval by the Immanuel Piranhas Committee, once approved you will be sent confirmation and instructions on how to register online. The Immanuel Piranhas Committee meet on the first Monday of each month. You will be notified of the outcome.

 Please tick that by registering with Immanuel Piranhas Swimming Club you are agreeing to abide by the Club's Constitution, its Policies & Procedures, and the Club's Codes of Conduct.

Family Name:				Au	ıstralia	n Citizen:	Yes /	No (pls circle)
Nominate Category		Fir	st Name			Date of	Birth	Fee
(i.e.Parent, Swimmer, etc)	(add	d Family name	e if different fror	n above)		Required by Swi	<u>mming SA</u>	\$
						Total F	ees	\$
Home Tel:			Мо	bile:				
Mother's Mobile:			Fatl	ner's Mob	oile:			
Email address for Club inforn	nation:							
Address:							Posto	code:
Last/current Swim School att	ended:				Le	evel:		
TRANSFER ONLY Current Club:								
Reason for transfer:								
MEMBERS ACKNOWLEDGEM	<u>IENT</u>							
I/we declare that the swimm past 5 years? Please tick one	•	t has not □ No	been suspei	nded from	n any si	porting clu	ıb/assoo	ciation in the
Name			Signatı	ıre				
	P	arent/Guard	lian to sign if u	nder 18 yea	irs			
COACH AUTHORISATION (Th	is section m	nust be co	mpleted bet	ore subm	itting)			
Squad Level (Please tick one)	: 🗆 Gold	🗆 Blue	🗆 Green	□ Red	□ BI	ack (Open	Surf)	□ White (Fitnes
Coach Signature:					Dat	:e:		

## Fees are as per Immanuel Piranhas Membership Fees Schedule 2022-23



# MEDICAL INFORMATION CONFIDENTIAL

This form will be kept strictly confidential and will only be available to appropriate coaching staff, team managers and Emergency Services Personnel responsible for the swimmer's safety at swimming events / activities.

#### Personal Details

Swimmer's name:		Date of birth:
Address		
Mobile:	Home:	Work:
Parent / Guardian Name 1:		
Mobile:	Home:	Work:
Parent / Guardian Name 2:		
Mobile:		

#### **Health Information**

Medicare No		Medic alert No. (if relevant):	
Private Health: Yes / No	Fund name and nu	nber	

Do you suffer from any of the following conditions or require medication?

Asthma	Yes / No	Seizures / epilepsy	Yes / No
Severe allergy (eg bee stings)	Yes / No	Diabetes	Yes / No
Joint disorder	Yes / No	Heart disorder	Yes / No
Vision impairment	Yes / No	Hearing impairment	Yes / No
Ear disorder	Yes / No	Skin condition	Yes / No
Incontinence	Yes / No	Communication difficulties	Yes / No
Any other condition (specify):			

Regular medications.....

Other relevant information.....

If you have answered "Yes" to any of the conditions above, is an Health Management Plan from your doctor / health professional attached? Yes / No

#### **Consent**

I give permission for coaching staff and team managers to seek medical assistance or to call an ambulance should one be required.

I agree to pay for any associated expenses which arise from requiring medical assistance or transport in an ambulance.

Name	Signature	Date
	Parent / Guardian to sign if under 18 years	



In line with privacy legislation Immanuel Piranhas seeks parental permission for the use of swimmer's images and names in our marketing and promotional materials. This includes all Immanuel Piranhas publications including but not limited to newsletters, marketing, including digital i.e. website, Facebook.

The purpose of such photographs will be to promote the club and to acknowledge achievements of our swimmers.

# **Parental Permission**

Swimmers Name: .....

## General Communication (Please tick one)

□ I/we hereby give permission for my child's image and name to be used for marketing and promotional material by Immanuel Piranhas. It is understood this may include social media (i.e. Facebook page), newsletters, website and other material to promote the club and recognise awards and achievements.

□ I/we do <u>not</u> give permission for our child's image to be used by Immanuel Piranhas for marketing, promotional and swimmer's achievement purposes.

## Closed Facebook Group (Please tick one)

□ I/we hereby give permission for my child's image and name to be used for internal communication by Immanuel Piranhas via its closed Facebook group.

□ I/we do not give permission for my child's image and name to be used for internal communication by Immanuel Piranhas via its closed Facebook group.

#### **Consent**

Name: .....

Signature: .....

Date: .....



# BEHAVIOURAL GUIDELINES GENERAL CODE OF CONDUCT

As a person involved in any way with the sport of Swimming, the following standard of behaviour and code of conduct is expected:

# **General Behavioural Guidelines**

- Respect the rights, dignity and worth of others
- Be ethical, considerate, fair and honest in all dealings with other people and organisations
- Be professional in, and accept responsibility for your actions
- Make a commitment to providing quality service
- Be aware of Swimming Australia's and Swimming SA's standards, rules and policies
- Operate within the rules and spirit of the sport (<u>https://swimmingausprd.wpengine.com/wp-content/uploads/Swimming-Australia-General-Code-of-Conduct-and-Disciplinary-Policy.pdf</u>)
- Understand the possible consequences of breaching Swimming Australia's National Integrity Framework (<u>https://www.swimming.org.au/resources/2022-swimming-national-integrity-framework</u>)
- Immediately report any breaches of the above to the appropriate authority
- Refrain from any form of abuse, harassment or discrimination towards others.
- Refrain from intimate relations with members whom they have a supervisory role or power over
- Refrain from any form of victimisation toward others
- Provide a safe environment for the conduct of activities in accordance with any relevant Swimming Australia policy
- Show concern and caution toward others that may be sick or injured
- Be a positive role model
- Respect the rights, dignity and worth of all participants regardless of their gender, ability, ethnicity, cultural background or religion
- Any incident that happens at a meet must be reported immediately to either Coach, any Club committee member, or Member Protection Officer (MPO) via <u>memberprotection.ipiranhas@gmail.com</u>

## **Competitor Behavioural Guidelines**

- Abide by the Club's General Code of Conduct
- Abide by Swimming Australia National Integrity Framework and Code of Conduct
- Always follow the rules of Swimming Australia
- Participate and train for the fun of it, not to please your parents or coaches
- Never show off or brag
- Always give your best and work hard to improve yourself and/or your team
- Control your temper; verbal or physical abuse is not acceptable
- Work equally hard for yourself and/or your team
- Treat all swimming participants, as you would like to be treated
- Do not bully or take unfair advantage of another competitor or teammate
- Be a good sport; cheer all other good performances of your team and opposition
- Never argue with an official; ask your Coach to make the necessary enquiries and use the appropriate rules and guidelines to resolve a dispute
- Cooperate with your Coaches, teammates, opponents, Club committee members, event staff
  and officials
- Participate for your own enjoyment, not to satisfy the expectations of others



# BEHAVIOURAL GUIDELINES GENERAL CODE OF CONDUCT

# Parent/Guardian Behavioural Guidelines

- Abide by the Club's General Code of Conduct
- Remember that children participate in sport for their enjoyment, not yours
- Encourage children to participate in sport for their individual enjoyment, personal satisfaction, and improvement
- That a honest effort is as important as victory
- Focus on the child's efforts and performance rather than winning or losing
- Encourage children always to play according to the rules and to settle disagreements without resorting to hostility or violence
- Never ridicule or yell at a child for making a mistake or performing below expectation
- Be an example to your child and others, and appreciate good performances by all participants (including your child, their team and opposition)
- Support all efforts to remove verbal and physical abuse from sporting activities
- Respect officials' decisions and teach children to do likewise
- Show appreciation for coaches and officials. Without them your child would not be able to participate
- Discuss any issues that arise during a competition with your child's Coach, Club committee member or Member Protection Information Officer (MPIO) in the appropriate forum

#### PLEASE SIGN THE BELOW ACKNOWLEDGEMENT AND AGREEMENT TERMS (PARENT/GUARDIAN OR SWIMMERS 18 YEARS AND OVER)

To the Immanuel Piranhas Club Committee,

I, \_\_\_\_\_\_ (Please Print Full Name) acknowledge that I/our family have read and understood the above Behavioural Guidelines - Code of Conduct and are aware of my/our responsibilities and duties as a member of the Immanuel Piranhas Swim Club.

I/We agree to be bound by its terms of reference and always uphold the values of the Code and will endeavour to abide by them.

Signature: \_\_\_\_\_

Name (Please print): \_\_\_\_\_

List Family Name Members: \_\_\_\_\_

# ONCE FORM HAS BEEN COMPLETED, PLEASE RETURN TO CLUB SECRETARY (IN PERSON or SECRETARY.IPIRANHAS@GMAIL.COM)

NOTE: Information contained in this document has been sourced from the Swimming Australia Safe Sport Framework.