

Please Print:

Family Last Name: _____

Parent/Guardian Names: _____

Returning members: Check here if there are no changes to the following:

Mailing Address: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

E-mail Address: _____

Doctor / Clinic: _____ Telephone: _____

Medical Concerns: _____

Alberta Health Care # - _____

New members – How did you find out about the Castor Tritons Summer Swim Club?

Newspaper A swimmer or parent Other: _____

Posters School Newsletter

Swimmers:

1. Name: _____ Age as of April 30th: _____

New Swimmer

2. Name: _____ Age as of April 30th: _____

New Swimmer

3. Name: _____ Age as of April 30th: _____

4. New Swimmer

5. Name: _____ Age as of April 30th: _____

New Swimmer

6. Name: _____ Age as of April 30th: _____

New Swimmer



Protect of Personal Information
Swim Alberta Consent Form

Club Name: _____

Swimmer's Name: _____

Swimmer's ID # _____

Please Read Carefully, complete and sign the consent section.
Swimmers under 18 years of age must have a parent or guardian sign the consent form.

Swim Alberta follows the tenants of the Personal Information Protection Act around the release of personal information and we require that consent be obtained for collection and use of personal information.

Collected information from club registration will be used for S/NC registration, swimming activities, team participation, pre-meet registration, results (media), and club/provincial records. All information collected from or pertaining to the swimmer will be used in the standard operating procedures of the association and unless noted below the information will be used as per operations. Should a parent/guardian or swimmer have a concern with the release of and or publication of their name, age and club affiliation within the standard operating parameters of competitions and the association then please sign the appropriate section below and the information will be modified for publication. All swimmers or their representative must sign a copy of this form.

Clubs: if section A has been signed and there are no issues on the release and publication of the swimmers name etc. then you the club must retain a copy of the signed form in your records for a 1 year period. If the parent, guardian or swimmer has signed section B then a copy of the form must be forwarded to Swim Alberta. Standard operation activities include, but are not limited to:

1. Individual photos that are taken at competition or for awards presentation
2. Photos or videos that are used in electronic or print media.
3. Swimmers name, gender, age and/or classification and results or provincial team and youth recognition program that are used in the swimming newsletters and other communications, in print form, electronic or otherwise.
4. The use of the swimmers name, gender, age and/or classification in team lists or databases to enable clubs to send data to other clubs, coaches, officials or the Swim Alberta office.
5. Other activities within the swimming community.

Please indicate your consent for Swim Alberta to use information supplied by yourself in one of the following manners. Sign **ONLY** one – A or B

A. I hereby consent to the collection and use of information (as outlined above).

Signature or Parent/Guardian Signature

Date

B. I do not consent to the collection and use of the information (as outlined above) EXCEPT for the following reasons.

Signature or Parent/Guardian Signature

Date

Do you consent to your personal contact information as defined in the Societies Act, being released to fellow members, whom have requested a copy of the register of members of the society in accordance to Service Alberta as part of the Societies Act Chapter S-14 Section 36.1 (3). **A copy of all forms that indicate a YES must be returned to the Swim Alberta office.**

_____ Yes, I consent

_____ No, I do not consent