

Arch Members

Next of Kin Information

Name _____

Address _____

Phone Number _____

Medical Disclosure

Please note our Club Requirements on the following which are potentially high risk or dangerous medical conditions when swimming in the sea;

Asthma – an inhaler must be taken to the Arch every time you wish use the facilities

Epilepsy – Unfortunately we are only able to accept membership in the instance we receive a copy of a letter from your consultant stating it is acceptable for you to take part in sea swimming.

Diabetes (dependent on type) - Unfortunately we are only able to accept membership in the instance we receive a copy of a letter from your consultant stating it is acceptable for you to take part in sea swimming.

Heart Conditions - Unfortunately we are only able to accept membership in the instance we receive a copy of a letter from your consultant stating it is acceptable for you to take part in sea swimming.

Please note failure to disclose any of the above conditions on this form will lead to instant dismissal of membership. If you develop any of these conditions during your term as a member these must be disclosed immediately to The Arch secretary and your membership will be updated accordingly.

Please complete details of any relevant medical conditions.

*An assessment is required before joining; also a good standard of front crawl is required.
Applicants would need to be able to swim more than 400 metres.*

Your name:

