



WELCOME CLUB DETAILS MEMBERSHIP FEES



Welcome to TOOWOOMBA AUSSI MASTERS INC, also known as Toowoomba Tadpoles.

As this is your first swim with us, we invite you to try us out. You are welcome to join our training sessions for **one** month, before you commit and if you're impressed and you want to join in the Fun, Friendship & Fitness, and become a registered member just see our Registrar – Bill Waterhouse and he will sign you up, or complete the attached form, or register on line <http://www.mastersswimmingqld.org.au> (and click on about us, membership online).

In the mean time, it would be appreciated if you could add your name and details to our new swimmer list.

Our club offers a variety of different programs designed to lift your level of fitness. Apart from normal training sessions, we also have distance swims to test you aerobic fitness levels. Regular opportunities arise to compete at Swim Meets if you so desire. Socially, we gather after the Sunday session for a cuppa and chat and occasionally we have a BBQ Breakfast and other social functions.

Safety:

AUSI Masters Swimming is concerned for your health and well being. It is strongly recommended that you have a medical examination and discuss with your Doctor your intention to undertake physical activity before starting or renewing any physical training activity. (If you have any medical conditions please advise the Coach)

To Join the Club:

You must be over 18 years of age at the time of joining, and be able to swim a minimum of 25 metres. Membership details and fees are overleaf.

Toowoomba Tadpoles Swimming Session Times:

Monday	6.30pm – 7.30pm	Program swim
Wednesday	6.30pm – 7.30pm	Program Swim / Aerobic swim (optional)
Thursday	6.30pm – 7.30pm	Program swim
Sunday	7.30am – 8.30am	Program swim
	8.30am – 9.00am	Cuppa & Chat

Swim sessions cost \$3. Before entering the pool, please sign the book and pay your \$3 session fee. We operate an honour system and would like to keep it that way so please don't abuse the privilege! If you need an "IOU" please write it in the book and write it in again when you pay.

COMMITTEE CONTACT DETAILS

Pres:	Stephen Gray	4639 5665	Vice Pres	Stephen Mina	4696 8912
Sec:	Marien Stark	0448474568	Treasurer:	Vanessa Welke	4634 6084
Reg:	Bill Waterhouse	4639 2434	Club Captain:	Wayne Carlish	4636 2315

 **Fun, Friendship & Fitness** 

info@ToowoombaTadpoles.org.au
www.ToowoombaTadpoles.org.au



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Why you must be a Registered Member

Under AUSSI Masters Regulations, it is compulsory to join the Association to be covered by Insurance against injury. We cannot allow non-members to swim at our training sessions, unless you are interested in joining. By being a member, it allows you to swim at any Registered Club and to compete at Sanctioned Swim Meets around our area and across Australia and the World.

The attached form is to be completed by persons wishing to become members and join AUSSI MASTERS SWIMMING, or members transferring from another club, or members renewing membership. Form is to be returned to Club Registrar. Membership fees are listed below.

MEMBERSHIP FEES 2012

REGISTRATION DATE	NATIONAL	BRANCH	CLUB	TOTAL
Standard Fee 12 Month to end of Calendar Year 2012	\$35.00	\$35.00	\$12.00	\$82.00
Health Care Card Holder 12 Month Calendar Year 2012	\$35.00	\$28.00	\$6.00	\$69.00
Life Member (TT club) 12 Month	\$35.00	\$35.00		\$70.00
Life Member (Health Care Card Holder) (TT Club) - 12 Month	\$35.00	\$28.00		\$63.00

Preference is for online registration - follow link from Toowoomba Tadpoles website www.ToowoombaTadpoles.org.au or

Cheques to be made out to **Toowoomba Masters Aussi Inc.**

 **Fun, Friendship & Fitness** 


info@ToowoombaTadpoles.org.au
www.ToowoombaTadpoles.org.au



MEMBERSHIP REGISTRATION FORM FOR ALL MEMBERS

*Member are to forward this form to their nominated club
Club Registrar to forward page 1 only or New Member Summary sheet
To QMS Registrar PO Box 181 Albany Creek QLD 4035)*

◆ Denotes compulsory information required

Club Details

◆ Club: _____ ◆ Year: _____

◆ First Claim Club: Yes No

Membership Details (◆select only one)

Renewal New Member Transfer (previous club: _____)

Health Care Card Holder

Subscription Type (◆select only one)

12-month member 4-month member 16-month member

Life Membership (if applicable)

Club life member Branch Life Member National Life Member

Personal Information

◆ Masters ID Number : _____

◆ Title: _____ ◆ First Name: _____

Middle Initial: _____ ◆ Last Name: _____

◆ Address: _____ ◆ Suburb: _____

◆ State: _____ ◆ Postcode: _____ Country: _____

Phone (◆At least one telephone contact number must be provided):

(work) () _____ (home) () _____

(mobile) () _____ (fax) () _____

◆ E-mail Address: _____

◆ D.O.B.: _____ / _____ / _____ ◆ Gender: Male Female

Alternative E-mail Address: _____

◆ Mailing List – Do you wish to be on the Masters Swimming Australia Inc. mailing list for newsletters and other relevant information? Yes No

Emergency Contact Details

◆ Emergency Contact Person: _____

◆ Emergency Contact Phone: () _____

Privacy Statement

Some of the information contained in this form will be disclosed to the Branch and National Office for membership registration purposes. Some of the information, including the health information, may be disclosed to other Masters Swimming Clubs, other Masters Swimming Branches or National Office for official Swim Meet purposes. Identifying information may be published in Masters Swimming publications such as Top Ten, Records, newsletters, etc.

Safety in Activity

Masters Swimming is concerned for your health and well being. It is strongly recommended that you have a medical examination and discuss with your doctor your intention of undertaking an activity program. Continued participation in swimming during pregnancy may pose health risks to women and their unborn children. As soon as you learn you are pregnant, you should seek advice from an appropriately qualified medical practitioner as to:

1. The risks involved in swimming while pregnant;
2. Whether it is safe to continue participating in swimming while pregnant, and if so, for how long you should continue to participate.

You should also inform your club Safety Officer or other assigned officer of your pregnancy.

Medical Disability

A completed Medical Disability form (available from www.mastersswimming.org.au) must be sent to your club for a Medical Disability to be considered for breaststroke and/or butterfly.

Declaration

As a condition of acceptance of my membership application, declare that I am aware of the risks associated in undertaking an activity program. I undertake to advise the Club Coach and Club Safety Officer (or other assigned officer) of any disability, lack of fitness, illness, or other medical condition, prior to participation in Masters Swimming activities.

Signature: _____ Date: ____ / ____ / ____

Club Use Only

Membership Fee received: \$ _____ Receipt No.: _____

A copy of the member's proof of age document is:

Attached On file Sighted

Health Care Card Sighted Sighted

A copy of the member's Medical Disability Form is:

Attached On file Not applicable

Name: _____ Position: _____

Signature: _____ Date: ____ / ____ / ____

Other club information: