



LEICESTER PENGUINS SWIMMING CLUB
Affiliated to the ASA, East Midland Region & Leicestershire ASA

MEMBERSHIP

First Name _____ Surname _____

Home Tel No. _____ Work Tel No. _____

Address (incl)
Post Code: _____

Email _____

Please help us to keep our club records updated by listing your ASA qualifications and any relevant teaching experience (with or without the appropriate certificates):

ASA Qualification	Date	Comments

Membership fees for Teachers, Coaches and Officials are free. The club also pays appropriate ASA subscriptions on your behalf.

Applicants signature _____ **Date** _____

Desk Official _____ Pool _____
