

Free Swimming Scheme Application Form For children aged 15 or under

To register for the Free Swimming Scheme, please complete this form and hand in to reception at your local participating pool: King Alfred Leisure Centre, Prince Regent Swimming Complex, St Luke's Swimming Pool.

For more information about the scheme please visit your local swimming pool or Call 0845 803 5519

Visit www.freedom-leisure.co.uk/freeswimmingBH







Privacy Notice - How we will use the information you provide in this form

Brighton & Hove City Council and Freedom Leisure are joint data controllers for purposes of the Data Protection Act (2018) and The General Data Protection Regulation (EU) 2016/679 ("GDPR") and are registered as a data controller with the Information Commissioner's Office (ICO).

- We are collecting your information to register for the Free Swimming Scheme.
- This information will used by Freedom Leisure to administer the scheme. We may use it to contact you for feedback about this scheme.
- The Council will anonymise your data to measure the impact of this scheme and ensure it is open to everyone as per the Equalities Act 2010. We collect your personal data and special category (sensitive) data with your explicit consent, under Article 6,1a of the GDPR.
- Your information will be held by Brighton & Hove City Council and Freedom Leisure on their membership database.
- Your information will be held until the registered person reaches the age of 21, in line with the Limitations Act 1980

Under GDPR you have certain rights concerning your information. For more information about your rights please visit: www.brighton-hove.gov.uk/healthylifestylesprivacy

To talk to us about the information we collect contact our Data Protection Team on 01273 295959 or data.protection@brighton-hove. gov.uk

Free Swimming Scheme Terms and Conditions:

- 1. You must bring your Free Swimming Membership Card with you each time you visit.
- 2. If you forget your card then we reserve the right to charge the relevant centre swim rate.

- 3. Lost or damaged Free Swimming
 Membership cards will be subject to a
 replacement charge. Details of this charge
 are available from each centre.
- 4. It is your responsibility to make the Manager of the Centre aware of anything that may affect your participation in the free swimming programme.
- 5. We may refuse you access to our centre if we consider the use of such facilities could put your health at risk.
- 6. You will be subject to the Free Swimming Agreement and rules bylaws and regulations of the Centre which are in force at the time.
- 7. Children under 8 years old MUST be supervised by a parent or adult (18 years or over) throughout their use of the pool facilities up to a maximum of two under 8's per adult. For all other conditions please refer to the Centre's own terms and conditions.
- 8. We may expel you from a Centre and/ or end your status as a Free Swimming Member without notice if at any time:
- **8.1** You break the conditions of your Free Swimming Agreement.
- **8.2** You do not comply with the rules and regulations of the centre.
- **8.3** You allow another person to use your Free Swimming card.
- **8.4** Your conduct, whether or not such conduct is the subject of complaint by another user.
- 9. The facilities available to you depend on the centre. Full details can be obtained from each centre. Services and facilities not included may be used by you at an additional charge at our discretion.
- Details of availability of Free Swimming sessions can be obtained from the participating centres.
- **11.** We may change these terms & conditions at any time.

This form should be completed by the Parent/Guardian of children aged 15 or under wishing to register for the Free Swimming Scheme. **All sections of this form must be completed**

Swimmer details:						
First name	Surname					
DOB School/College						
Address	Post Code					
Additional information						
The following questions help us learn about this people living in the city are able to benefit from the city are able to benefit from the city are able to be city are able to be the city are able to be the city are able to						
How many hours in the past week did you (swimmer) spend doing physical activity outside of school/college time? This may include activities such as sport, dance, walking, cycling, swimming, or active playing.						
□0 □1 □2 □3	□ 4 □ 5 □ 6 □ 7					
What is your gender Female Male Other Prefer not to say						
Do you identify as the same sex as you were assigned at birth: Yes No Prefer not to say						
Yes a little Yes a lot No Prefer If yes, please state the type of impairment. If you have Physical Impairment Sensory Impairment Learning Disability/Difficulty Long-standing illness	not to say ve more than one please tick all that apply. Mental Health condition Autistic Spectrum Other Developmental Condition Other (please state)					
Other White Black or Black British: African Caribbean Mixed: Asian & White Black African & White Any other mixed background	oh / British Irish Gypsy / Irish Traveller Other Black te Black Caribbean & White					
Other: Arab Any other ethnic group Prefer not to say:)					

Parent/ Guaru		"					
First name		Sur	name				
Address				Post Code			
Contact number		email address					
Parental Waiver and Consent							
Please tick the boxes below to confirm the following, before signing below:							
I consent to the information provided on this form to be used for the purposes outlined in the Free Swimming Scheme Privacy Notice							
I agree to the Free Swimming Scheme Terms and Conditions							
I authorise Freedom Leisure to take a photo of my child for use on their Free Swimming card							
Freedom Leisure have exciting offers and news about the products and services on offer at your local leisure centre that we are sure you would like to hear about. We would like your permission to keep you up to date. Please tick the boxes below to confirm your consent for us to send you this information. Email Phone/SMS Letter As the parent or legal guardian of the child named over, I hereby give my full consent and approval for my child to be registered for, and take part fully in, the Free Swimming scheme. If I cannot bring my child to register in person, I consent for a staff member or volunteer from one of the Council Authorised organisations to verify my child's age and register my child on my behalf. I understand that there are certain risks of injury inherent in the practice and play of swimming, and I							
am willing to assume these risks on behalf of my child. I hereby certify that my child is fully capable of swimming and has no illnesses, limitations, or disabilities that would restrict or limit swimming.							
Parent/Guardian S	Signature			Date			
Office Use Only Proof of age shown or form received by authorised third party organisation 3rd Party Organisation Name: Yes No							
3rd Party Staff Name Staff initials:	e: Date registered:	3rd Party Sig Members			Date:		
2 (3) 11 11 (13) (3)		11101110013					

Proof of age shown (specify type of ID):

7728/March 2023

Staff initials: