

**COVENTRY SPORTS & LEISURE CENTRE
APPLICATION FOR ACCESS FORM**

**CITY OF COVENTRY SWIMMING CLUB
TRAINING SCHEME/WATER POLO (SWIMMERS ONLY)**

MEMBERS NAME _____

ADDRESS

POST CODE

DATE OF BIRTH _____

TELEPHONE NUMBER DAYTIME _____

TELEPHONE NUMBER EVENING _____

Email.....

**PLEASE HAND THIS FORM COMPLETED INTO RECEPTION TOGETHER WITH
£2.50 FOR ISSUE OF CARD**

**YOUR CARD WILL BE GIVEN TO CITY OF COVENTRY SWIMMING CLUB FOR
COLLECTION.**

**THE CARD IS FOR USE OF SWIMMERS OF CITY OF COVENTRY SWIMMING
CLUB ONLY**

**THE CARD REMAINS THE PROPERTY OF COVENTRY SPORTS TRUST AND
CAN BE WITHDRAWN AT ANY TIME**

**THIS INFORMATION IS FOR ACCESS PURPOSES ONLY,
WE WILL FOLLOW THE GUIDELINES OF THE DATA PROTECTION
ACT AND WILL NOT USE THIS INFORMATION FOR ANY OTHER
PURPOSE.**

