IFSTA Membership Application Form



We hereby apply to become members of the International Federation of Swimming Teachers' Associations (IFSTA).

Membership Type			Full		Asso	ciate		Corresponding
Name of Organisation								
Contact Name								
Position								
Address								
Phone Number								
Fax Number								
Email Address								
Number of Members								
We agree to:								
2. Work wi lifesavin 3. Pay the	th the IFSTA t	to pr	omote the I	highe	est lev	vels of stan	dards	om time to time. in swimming and uk for current
Signed						Date		
Please send yo	ur completed	appl	ication forn	n and	d any	other requi	red in	formation to:
Swimming Tea Midlands WS2		ciatio	on, Ancho	r Ho	use,	Birch Stree	et, Wa	alsall, West

Information on the Member Organisation

1. What is the type of organisation?
☐ Governmental ☐ Private ☐ Commercial ☐ Non-profit
2. When was your organisation founded?
3. How many members does your organisation currently have registered?
4. How do you apply to become a member of your organisation?
5. Is membership of your organisation open to anybody, or are there conditions for being accepted as a member?
6. Does your organisation charge an annual fee to its members? If so, how much?
☐ Yes ☐ No
7. Does your organisation have a constitutional document? If so, please include a copy with this application.
☐ Yes ☐ No

8. Does your organisation have a governing committee?					
☐ Yes ☐ No					
If so, how are they elected?					
9. Do members of your organisation have the right to vote at annual or other meetings?					
□ Yes □ No					
10. What was the date of the last annual meeting of your organisation?					
11. Does your organisation have a mission statement? If so, please include a copy with this application.					
☐ Yes ☐ No					
12. Does your organisation have a child protection policy? If so, please include a copy with this application.					
□ Yes □ No					
If not, will your organisation agree to abide by UNICEF protocols on child protection? A certified copy of the minute when your governing committee agreed to do this is required.					
☐ Yes ☐ No					
13. What is the official language(s) of your organisation?					
14. Is your organisation recognised by your state government?					
□ Yes □ No					
15. Is your organisation member of any other international organisations?					
□ Yes □ No					
If so, which organisations?					

16. Does your organisation work in partnership with any other organisations, either commercial or non-commercial?
☐ Yes ☐ No
If so, please provide details of these organisations and the nature of your organisation's partnerships with them.
17. Does your organisation train swimming teachers? If so, please include a copy of the syllabus with this application.
☐ Yes ☐ No
18. Does your organisation have an incentive scheme, such as a badge scheme, for children learning to swim? If so, please include details of the scheme with this application.
☐ Yes ☐ No
19. Does your organisation undertake any other activities?
☐ Yes ☐ No
If so, please provide details.

Additional Documentation

In addition to the information supplied within this application, please supply copies of the following documentation, where appropriate:

- Constitution
- Mission statement
- Child protection policy, or copy of minute agreed by governing committee
- Details of membership of other international organisations
- Partnership deals with other organisations
- Syllabus for training swimming teachers
- Details of incentive schemes
- Details of any other activities.