

Athlete & Unified Partner SAM - Update Form

Person completing this form: _____ Position: _____

Group/Region : _____ Contact Tel : _____

This form is for the updating/amending of information held on the Athlete Membership Database. Please complete this form and return to National Office **immediately when any changes occur to your athletes' details** i.e. no longer an active member, change of address, addition or deletion of a sport OR if you athlete is moving to another group.

Athlete Name: _____ **Date of Birth:** _____

SAM Number: _____ Please mark this athlete/UP as inactive:

If the athlete is moving to another group please complete the following:

To which Group/Region is the athlete moving to & why?: _____

New Contact Address: _____

Tel (Day): _____ (eve) _____

Please add the additional sports ticked below to the athlete's current membership details. I confirm the athlete take part regularly (minimum 26 weeks per year) in the sport/s indicated:

- | | | | |
|---------------|--------------------------|-------------------|--------------------------|
| Alpine Skiing | <input type="checkbox"/> | Equestrian Sports | <input type="checkbox"/> |
| Aquatics | <input type="checkbox"/> | Football (Soccer) | <input type="checkbox"/> |
| Athletics | <input type="checkbox"/> | Golf | <input type="checkbox"/> |
| Badminton | <input type="checkbox"/> | Gymnastics | <input type="checkbox"/> |
| Basketball | <input type="checkbox"/> | Powerlifting | <input type="checkbox"/> |
| Bocce | <input type="checkbox"/> | Sailing | <input type="checkbox"/> |
| Boccia | <input type="checkbox"/> | Table Tennis | <input type="checkbox"/> |
| Bowls | <input type="checkbox"/> | Tennis | <input type="checkbox"/> |
| Bowling | <input type="checkbox"/> | MATP | |
| Cycling | <input type="checkbox"/> | Other _____ | |