



DOLPHINS and RACE COACHING - CONSENT

Registration: Please complete the following form for your child.

Name Date of Birth...../...../.....

Address

Post Code Tel No..... E-Mail.....

Please detail Health / medical / other conditions that may affect your child while on the water

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Any Medication/Assistance carried (e.g. inhalers, sugar etc.)?

Can your child swim?

Would you like your child to wear a helmet while on the water?

Identification and Acknowledgement of Risk

I acknowledge that there are risks involved in all water sports. I am also aware that other participant's actions and the actions or inaction of the organizers of the course can endanger safety. I undertake that my dependant will act responsibly and follow the directions given by the instructors or the safety boat crew.

Signed..... Print Name.....

Date/...../.....

Emergency Contact Telephone Number

Parental Consent

I agree to the instructor/coach acting in loco parentis for my dependant. I have made arrangements for my dependant to be collected promptly at the end of each session. I also agree to the appropriate photographing or videoing of my dependant solely for the purposes of assisting in their training or for Club archives or publicity.

Signed.....(Parent/Guardian) Date

Child's Agreement

I (insert name).....agree to Chanonry Sailing club photographing or videoing my involvement in sailing

Signed..... Date.....

The details you provide are held by the Club in accordance with the Club Privacy Policy which is available at: <https://www.chanonry.org.uk/privacy-policy.html>