# Consent Form – for Guests & New Members of BSCC

*Note - this form should be completed on behalf of under 18s by an adult responsible for them.*

|  |  |  |
| --- | --- | --- |
|  | **Names:** | **Dates of Birth:** |
| [1] | click here to enter | DD/MM/YYYY |
| [2] | click here to enter | DD/MM/YYYY |
| [3] | click here to enter | DD/MM/YYYY |

Please tick box for any of above **NOT able to swim** 50m in light clothing [1][ ]  [2][ ]  [3][ ]

Do any of the above consider themselves to have a **disability**, long-term
illness, health problem or impairment that limits daily activities? [1][ ]  [2][ ]  [3][ ]

|  |
| --- |
| Please mention here any **medical or other factors** relating to the 3 people above which could affect their safety or ability to participate (e.g. heart conditions, asthma, allergies, epilepsy): |
| [1] | enter (if any) |
| [2] | enter (if any) |
| [3] | enter (if any) |

|  |  |
| --- | --- |
| **Address:** | **Postcode** |
| enter | enter |

|  |  |
| --- | --- |
| **Contact phone numbers:** please enter one or more | **Who is this?** (name / relationship) |
| Contact phone number | name |
| Contact phone number | name |
| **Phone number of a 3rd party, for emergency use** | **Who is this?** (name / relationship) |
| Enter a different number to those above! | relationship |

|  |  |  |
| --- | --- | --- |
| **Email:** | enter email address | *(select Yes/No)* |
| May we forward to British Canoeing to collect feedback about your experience? | YES |
| Would you like to be added to British Canoeing’s mailing list? | YES |

|  |
| --- |
| * I agree to follow the coaches’ instructions
* I understand that canoeing can be a hazardous activity and is undertaken at my own risk
* I have been made aware of the risk of [leptospirosis (Weil’s Disease)](http://www.nhs.uk/Conditions/Leptospirosis/Pages/Introduction.aspx)
* I will comply with any special conditions which the club places on my/our participation arising from the coaches’ assessment of my/our abilities
* Iconsent to this information being stored by the club and used as described in the club Privacy Policy (available on our website)
* BSCC mayuse my/our photograph on the club website, in the press or other publicity material *(if you do not wish photos to be used, please check this box* [ ] *)*
 |
| **Signed** (names of adults): | enter names of all adults participating or signing for under-18s |
| **Relationship:** *(if signing on behalf of a child)* | enter if applicable  | **Date**: | DD/MM/YYYY |