



Visitor Form

Personal Details:

Name:

Gender:

Date of Birth:

Address:.....

.....

.....

Postcode:

Tel (h):

Tel (w):

Tel (m):

E-mail:

British Canoeing membership number:.....

Medical/ Injury Details:

Detail any medical conditions/ allergies that we should be aware of:

.....

Details of medication that must be administered:

.....

Past or current injuries that we should be aware of:

.....

These details may need to be passed onto the coach or competent paddler in charge.

Emergency Contacts:

Name:

Relationship:

Tel (m):

Tel (h):

Tel (w):



You may attend a maximum of six sessions as a visitor.

Sea sessions cost £10 per person, pool sessions cost £10 per person..

Payment by Cash / Cheque or BACS:

Account number: 62181580
Sort Code: 60-10-15
Account Name: Hastings & District Canoe Club

I am aware of the fact that it is for my own safety and that of other paddlers to declare any relevant medical conditions. I will inform the paddler in charge of the session.

Canoeing and kayaking are assumed risk sports. When taking part, you are assumed to be aware and accepting of the risks associated with these sports. The person mainly responsible for your safety is you. If you do not adhere to the club's safety policy, and follow instructions from the paddler in charge, you may be putting yourself, or others, at risk.

I confirm that I can swim 50m.

Signed: Date:

For members under 18:

Parent or Guardian Name (block capital):

.....

Tel (h):if different from above

Tel (w):

Tel (m):

E-mail:

Signed:Date:.....