



TVSC UNDER-18 SAILORS
CONTACT DETAILS
& PARENT CONSENT

Office use:	Date
Added to Email lists (Juniors+All):	
Added to Emergency contacts:	

Child / Teenager NAME	Age	D.O.B	Can swim 25m unaided? YES / NO	Any health or other issues that could affect ability to participate YES/NO [Give details below]

Note here details of any medical, physical or other information that we require to help your child participate and be safe (or discuss with TVSC instructor):

PARENT(S) / GUARDIAN(S) CONTACT DETAILS

Parent(s)/Guardian(s) NAME(S)	Relationship	Address	Phone numbers & Email address

PARENT / GUARDIAN CONSENT

The above named under 18's have my consent to participate in Juniors Learn to Sail Courses and other Juniors sailing sessions with the Tweed Valley Sailing Club. **I acknowledge** that sailing does involve risks and I am aware that all precautions will be taken to minimise any risk, including:

- A PFD (Personal Floatation Device) will be provided by TVSC.
- A safety boat will be on hand to assist whenever juniors are sailing.
- **Footwear / Hat / Sun protective clothing / Water to be provided by participants.**
- **Parents are required** to supervise their children at all times when on land.

PHOTOGRAPHS of sailing participants may be used by the Tweed Valley Sailing Club in newsletters to members, on the club's website and official Facebook page and for promotional purposes in local newspapers. Please advise the club if you do not wish photos to be published in a public domain.

Parent / Guardian SIGNATURE: _____ Date: _____

JUNIOR'S RESPONSIBILITY AGREEMENT

- For my own and others' safety I will **follow instructions** and participate to the best of my abilities.
- I will **respect and be kind** to others.
- **I will respect and care for all the equipment** and boats we use.
- I am here to enjoy learning new skills and **will help and encourage others** to do the same.

ALL JUNIORS to Sign below after reading their responsibilities

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