

Experienced Juniors Consent Form

Name of Paddler:

Date of birth:

• I am aware that the above paddler may be training on the water without a buoyancy aid. He/she acknowledges the requirement to pass a swim test.

Signature of parent/guardian:

Name of parent/guardian: Date:

Parameters set by coach for the above named individual:

- Ability to swim 100 meters without buoyancy aid in appropriate water.
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Signature of club coach:

Name of coach:

Date:

It should be noted that the above consent can be overruled by the coach leading the training on the day.