



Truro Canoe Club



Affiliated to



Membership and Consent Form 1 October 2018 – 30 September 2019

Name		
Address		
Postcode		
Telephone		
Mobile		
Date of birth		
E-mail1		
Email 2		
British Canoeing Number		Expiry date
British Canoeing Personal Performance Awards (Star awards)		
British Canoeing Coaching qualifications		
Emergency contact: name and relationship		
Emergency contact: telephone number		
Emergency contact: mobile number		
Type of membership		Fee: £

- I enclose my payment of £_____ (Cash or cheque made payable to Truro Canoe Club)

• Bank transfer: Sort code: 40 16 06 Account No.: 81034561
Delete as necessary

Please email or post the completed form to the Membership Secretary,
Sunalta, Glenthorne Road, Threemilestone, TR3 6TT.

Email: trurocanoecub@outlook.com
<https://trurocanoecub.wordpress.com/>

Continues overleaf

Paddler's Consent: all members and potential members to sign, including juniors

I agree to details provided by me being held by Truro Canoe Club on computer and being used for club administration and to keep me informed of club activities. The club may share information with British Canoeing if required to do so by British Canoeing. The club will not share my details with other third parties without my prior permission.

I confirm that I consent to images of me participating in club activities being used for club publicity, including on the club's website and Facebook.

If I provide coaching to the club's members on a formal or informal basis I authorise the club to verify my coaching qualifications with British Canoeing. I confirm that I will assist the club in obtaining the appropriate DBS certificate in accordance with the current procedures of British Canoeing.

I confirm that I am aware and understand that canoeing and kayaking are assumed risk water contact sports that may carry attendant risks. **I have read the club risk assessments.** I confirm I can swim 100 metres in canoeing clothing.

I agree to be bound by the rules of Truro Canoe Club, and will not hold them liable for any missed sessions, personal injury, loss or damage to clothing or equipment. **I agree to abide by the relevant code of conduct and the club Health & Safety procedures.**

Signed

Check box to consent to the above

Name

Date

Medical: All members: Please provide details of any relevant medical condition that you may have, such as asthma, epilepsy, fainting, heart conditions, diabetes, allergies etc. Details will be held by the Club Welfare Officer and any information given may be handed to the coach who is taking the session.

It is the responsibility of the individual paddler / parent to advise the coach of any relevant medical conditions before the coaching session commences

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Parent's / Guardian's Consent for all children under 18 years of age

I agree to my child taking part in Truro Canoe Club activities and will not hold the club or committee liable for any missed sessions, personal injury, loss or damage to clothing or equipment.

I agree that if my child attends a trip away from the club premises they may be transported in an adult member's vehicle.

I confirm that I consent to images of my child participating in club activities being used for club publicity, including on the club's website.

I confirm that I / my child agree(s) to the Paddler's Consents set out above.

Signed

Name
Parent / Guardian (*delete as appropriate*)

Date