



Parent/Guardian declaration:

Under law this member is my dependant. I am responsible for my dependent, for his/her behaviour and adherence to the Club rules.

I acknowledge that there is an element of risk in this sport and that all sailors participate at their own risk.

I give permission to administer any relevant minor injury treatment or medication to the above named participant if necessary.

In an emergency situation I authorise the organisers to take my son/daughter to hospital and give my full permission for any emergency treatment required to be carried out in accordance with the hospital's diagnosis and recommendations. I understand that I shall be notified, as soon as possible, of any incident, hospital visit or treatment given.

My son's/daughter's image may be used by the Coalhouse Fort Radio Yacht Club and other local media, and that I am aware that my son/daughter may be video recorded whilst sailing.

I understand that Emails will be sent as open Emails to all parents and sailors. I give permission for these details to be held in electronic form.

It is with my agreement in full to the above that _____

*Becomes a Junior Member of CHF RYC

*Participates in the _____ event at CHF RYC
(Delete as necessary)

Signed parent /guardian

Name

_____ Relationship _____