Training at Reading Sailing Club 2017

Oppie / Youth and Junior Sailing Application Form

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Name
Date of Birth
Address
Telephone No
Emergency contact name and number
Parent's Email address
Are you applying for Oppie Beginners or Oppie Improvers or Youth and Junior?
Previous Sailing experience if any
Swimming Ability
Health Declaration
Treatti Declaration
Details of any medical treatment being received (if none write 'NONE')
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If your child suffers from epilepsy, giddy spells, asthma, diabetes, heart condition, allergies or
anything else you believe may affect them during their time with us, please provide details
I will accept responsibility for my child at all times during Oppie / Youth and Junior Sailing.
This accept responsibility forms at an arrest saming exploration and carrier caming.
Signature of Parent
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Important this is a 2 page form. Both pages must be completed and signed

In accordance with our child protection policy Reading Sailing Club does not allow for photographs or video of young people to be taken or published without the consent of the parents/guardians and children.

Conditions of Use of Photography or Video

- 1. We will only identify a child by reference to the child's first name
- 2. We may use photographs within the clubhouse or on the club website
- 3. We will only use photographs of children who are suitably dressed, to reduce the risk of such images being used inappropriately.
- 4. Photographs or video may be used for coaching purposes to illustrate incidents on the water.

Consent for use of photographs and video

I grant Reading Sailing Club without payment the right in perpetuity to make, use and show any photograph or video. I have read and understood the Conditions of Use above.

Signature of Parent

Signature of Child

Please email completed form to oppies@readingsc.org.uk