



## OPEN WATER SWIMMING MEMBERSHIP & CONSENT FORM

Surname: \_\_\_\_\_ Title: \_\_\_\_\_

First name(s): \_\_\_\_\_ Ethnic origin: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Male: ☐ Female: ☐ Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_

### EMERGENCY CONTACT DETAILS

Name: \_\_\_\_\_

Relationship to participant: \_\_\_\_\_

Contact numbers - TEL: \_\_\_\_\_ MOB: \_\_\_\_\_

### DETAILS OF ANY MEDICAL CONDITIONS/INJURIES/DISABILITIES

that may affect your safe participation in open water swimming and any safety measures that need to be taken e.g. asthma and having inhaler accessible, impaired hearing etc:

### DISCLAIMER

By signing this disclaimer you are accepting on your behalf, or on behalf of your son or daughter if under 18, that you or they are taking part in Open Water swim sessions of your/their own free will, knowing that the session will have safety cover in place. That you are happy to take responsibility for your/their actions in swimming in open water and that Bolton Triathlon Club cannot be held responsible for any illness, accidents, injury or death. You are also agreeing that you/they are a competent swimmer and able to swim 500m without stopping.

Name: \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

### PARENTAL/GUARDIAN CONSENT FOR SWIMMERS UNDER 18

I, .....give permission for my son/daughter to participate in open water swim coaching sessions. I understand and agree that my son/daughter participates in these sessions entirely at his/her own risk. I am satisfied that he/she is sufficiently responsible and competent to take responsibility for his/her own safety.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Are you competent on a sit on top kayak and willing to provide safety cover in return for a free swim per 90 mins of safety cover?**

FOR CLUB USE

Paid: \_\_\_\_\_

BTC MEMBER: \_\_\_\_\_

Rochdale TC card: \_\_\_\_\_

Date: \_\_\_\_\_