

WESTON SAILING CLUB

YOUTH/JUNIOR SAILING - PARENTAL DISCLAIMER - 2009 Page 1 of 2

Please complete in BLOCK CAPITALS:

In consideration of your accepting (Name of Child).....

Of address.....

at my request to participate in the Youth/Junior Sailing activities of Weston Sailing Club, I agree that I will not for myself or for the above named hold the Club, its officers, members or assistants liable for any injury or damage or loss suffered by the above named while engaged in Club activities either on Club premises or elsewhere, or activities for which the Club is or may be responsible and I will indemnify the Club, its officers, members and assistants against all actions, claims or demands which might arise.

I accept responsibility for his/her conduct while participating in the sailing programme on Southampton water or adjacent waters and in and around the Club premises. I understand that the decision to allow the above named to participate in any organised activity is my sole responsibility. I declare that the above named can swim 50 metres unaided. I understand and agree that my child may be photographed by the Club or its agents and the photograph used for promotional purposes and waive any copyright.

I understand that sailing, in common with all water sports, has its attendant risks. I further understand that the Club is only able to provide rescue facilities during the hours of club racing, organized training and youth sailing and that, outside these hours, the Club cannot be expected to exercise supervision or control. I understand that, even during Club activities, the Club cannot accept responsibility for children or any other persons not engaged in racing or training.

The organizers of Youth Sailing do not accept responsibility for any loss, damage or injury suffered by persons and/or their property arising out of or during the course of their activities whilst supervising, training or coaching unless such injury, loss or damage was caused by or resulted from negligence or deliberate act.

I undertake to ensure that he/she will attend Weston Sailing Club Youth/Junior Sailing activities suitably clothed and provided with suitable buoyancy. I accept responsibility for the seaworthiness of his/her boat own boat if appropriate and for its adequate insurance against third party claims to the sum of at least £2 million.

I declare that I have disclosed any medical problems that might possibly affect the above named during the course of Club activities below. I consent to any emergency medical treatment necessary during the course of Youth/Junior Sailing activities.

Medical conditions.....

Signed.....Date.....Child's Date of Birth.....

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Full Name of parent.....

Childs Previous Sailing Experience

.....

.....

Address.....

.....

.....

Post Code.....

Contact Telephone Numbers, during Youth sailing:

1)

2)

Will you be at the club during Youth sailing Yes/No

Boat sailed by child at Weston Sailing Club.....

Sail number

Boat sailed by parent at Weston Sailing Club

Sail number

Email address for correspondence