



Stour Valley Canoe Club

Consent Form

CONTACT DETAILS

Full Name (as appears on Passport):		Date of Birth:
Main Address (where participant stays the majority of the time e.g. term-time):		Correspondence Address (if different to Main Address):
Postcode:	Postcode:	
Home Tel:	Mobile Tel:	
E-mail:	Membership (if applicable): BC / SCA / CW/CANI	
Membership Number (if applicable):	Membership Expiry date (if applicable):	

EMERGENCY CONTACT DETAILS (if participant is under 18, at least one contact should be a parent / guardian)

Contact Name 1:	Contact Name 2:
Relation to You:	Relation to You:
Address:	Address:
Home Tel:	Home Tel:
Mobile Tel:	Mobile Tel:
E-mail:	E-mail:

MEDICAL INFORMATION

Doctors Name:	Doctors Tel:
Surgery Address:	NHS Medical Number:

Epilepsy	Yes/ No	Asthma	Yes/ No
Diabetes	Yes/ No	Recurring Headaches	Yes/ No
Skin Condition	Yes/ No	Please specify:	
Allergies	Yes/ No	Please specify:	
Other	Yes/ No	Please specify:	
Does the participant have a disability	Yes/ No	Please specify:	
Can you swim more than 50m?	Yes/ No		

If you have answered **yes** to any of the above, please list any medication that the participant is currently taking, including **Method** (e.g. injection, inhaler), **Dosage and Frequency**:



Please provide any additional information which you think we should know, including details of any known vaccinations which the participant has had:

MEDICAL CONSENT

I hereby give consent that the bearer of this document may act on my behalf / my child's behalf in the event of a medical emergency. In accordance with the declaration below: (Please mark the box as is appropriate)

- I give consent for ANY medical treatment to be provided in the event of an emergency.
I give consent for any medical treatment to be provided EXCLUDING (please specify):

Signed (Legal Guardian)..... Print Name (Legal Guardian).....
Signed (Participant if over 18)..... Date.....

ACTIVITIES CONSENT

- 1. I give my consent for the named participant above to take part in water and/or land based adventurous activities.
2. The activities provided are of a strenuous and adventurous nature that carries a higher level of risk. I acknowledge that adventurous activities carry an element of risk and therefore accept the need for responsible behavior from the participant, including listening to and following safety instructions.
3. I have declared all medical conditions that the named participant has in the Medical information section of this form. I declare that the named participant is able to swim and is confident in open water.
4. I have read and understood all information provided and have sought answers to any and all questions I have from the relevant British Canoeing coaching staff.
5. During the event/activity we may take photos and video which may be utilised on social media or our website. They may also be used to promote future events/activities. If you are happy for images of the named participant to be published in this way please check the box below.

I am happy for images of the participant to be published as described above.

- 6. I understand that the named participant's data will be used for administering their event/activity entry. This may include, but is not limited to, sending them information on running orders and directions. Event/activity relevant information may also be published on a website or other media.
7. By entering the event/activity, I consent to the named participant's Personal Information being stored or published as part of the results and rankings of the event/activity and agree that British Canoeing may pass such information to any affiliated organisation for the purpose of insurance, licences or for publishing results either for the event/activity alone or combined with or compared to other events/activities. Results may include (but not be limited to) name, any club affiliation, race times, occupation and age category and includes all information collected on this form.
8. All data gathered on this consent form will be utilised only for the purposes detailed on this form and will be processed and stored in compliance with the British Canoeing Data Protection Policy and in accordance with all applicable Data Protection laws in effect at the time of publication of this form, including but not limited to, the GDPR which came into effect on 25th May 2018. Further information on British Canoeing's approach to privacy and data protection, including our privacy notices, policies and contact details, can be located in our Privacy Centre (https://www.britishcanoeing.org.uk/about/privacy-centre).

Signed (Legal Guardian)..... Print Name (Legal Guardian).....
Signed (Participant if over 18)..... Date.....