

PARENTAL CONSENT FOR LEARN to ROW ACTIVITIES

This form gives your consent for your child to participate in the 2022 Learn To Row program at the Gisborne Rowing Club, ANZAC Park, Gisborne. The information contained within it will be used in case of emergency and it is a requirement that it is completed in full and returned BEFORE the commencement of the activity.

Cost for the 6 week Learn to Row program: \$20

PERSONAL DETAILS

Full name of Rower:			
Gender:	M	F	Date of birth:
Interest:	Rowing / Coxing <i>(delete as applicable)</i>		
Rower email address:			
School:			Year:

MEDICAL INFORMATION

delete as applicable and provide relevant details

Does your child have any allergies or sensitivities that we should know about?	YES / NO
Does your child take any medication including creams, inhalers, tablets, sprays or supplements that we should know about?	YES / NO
Is there anything else you think we should know?	YES / NO

OTHER INFORMATION

Has your child demonstrated that she/he is able to swim 50 metres in light clothing? YES / NO

Do you consent to your child being video recorded or photographed to assist with training / coaching? YES / NO

CONTACT INFORMATION

Name:			
Relationship:			
Contact telephone number(s):			
Parent email address:			

GOOD CONDUCT

- Everyone taking part in this activity are representatives of their respective school. A high standard of conduct is required at all times. The Gisborne Rowing Club will not tolerate any form of bullying, racist or other abusive behaviour.
- Everyone taking part in this program must agree to these conditions and understand that disciplinary action may follow if they misbehave.
- In the case of serious misconduct or repeated bad behaviour, the rower may be excluded.

DECLARATION BY PARENT/GUARDIAN

In signing the declaration, I acknowledge and agree to the terms of the Good Conduct agreement as listed above. I accept that while every effort will be made to safeguard belongings, the Gisborne Rowing Club or any of its representatives shall not be held responsible for any losses that may occur.

Signed:	Full name <i>(capitals):</i>
Date:	Father / Mother / Guardian <i>(Please delete as req'd)</i>

DECLARATION BY ROWER

I acknowledge and agree to the terms of the Good Conduct agreement as listed above.

Signed:	Date:
Print Name:	