

Forth Canoe Club – Parental Consent Form

Name of child:

Name of parents:

Age of child

DOB of child

Address:

Email address:

Mobile number(s) of parent:

2 x Emergency Contacts – Number 1

- Name
- Tel Numbers
- Emails
- Address
- How related to the child?

Number 2

- Name
- Tel Numbers
- Emails
- Address
- How related to the child?

Medical info for child (specific, what medication, when etc): (They must be responsible for administering this themselves, we cannot help).

Any other relevant information?

CONSENT FORM:

I give consent for Forth Canoe Club to act on my behalf in the event of an incident or illness affecting my child. I give consent for my child to be treated by a trained first aider and/or medical professional, should this be necessary. I also give consent for my child to participate in all the activities involved in this summer course, and understand there is a degree of risk involved in these activities.

NOTES SHEET FOR PARENTS

Please be aware that any and all canoeing involves risks although we will take all reasonable steps to mitigate any risks. By coming or sending your child on this course, you agree to accept this risk.

Name:

Signature: