



EMERGENCY FORM.



Slea Paddlers

Personal Details			
Name		Date of Birth	
		Phone number	
Address		Mobile number	
		E-mail Address	
Postcode			

Emergency Contact, Consent and Medical

Canoeing and Kayaking are safe and fun sports, but like other sports or outward bound activities there is a certain level of risk. Slea Paddlers coaches have been trained in understanding and managing risk within the context, which the activities will be conducted. Like other activities of this nature however accidents may happen and it is for that reason the Slea Paddlers Committee asks Club users/members to provide the following information, and in the case of under 18's consent to take part in the activities.

	1 st Emergency Contact	2 nd Emergency Contact (if 1 st not available)
Name:		
Phone Number:		
Mobile Number:		

Doctor: In the case of an emergency I give consent for a responsible adult to pass on the following details:

Doctor	Medical Conditions
Practice Address:	
Postcode:	
Practice Phone Number:	

Consent (Under 18's only)

I give consent for _____ to take part in Slea Paddlers club activities:

*A "Taster" Session (this covers up to 3 sessions, before membership is required)

*Throughout their period of annual membership *Please delete one

Name: Signature:..... Date: