

SOUTHSEA ROWING CLUB

Registration form for people using club equipment.

Surname _____

First Name(s) _____

Address _____

Post Code _____ Telephone _____

Email _____ Age (if under 18) _____

Home Contact Name _____ Telephone _____

Can you swim 100 metres in rowing kit/light clothing? _____

Are you disabled or suffering from any illness which might impair your rowing capabilities (eg Asthma, Epilepsy) _____

If Yes you are advised to consult your doctor before taking part.
Please give details

Are you taking any medication which physical exercise may cause adverse effects

The club is insured against public liability to third parties but this does not cover the user of club equipment. Do you understand therefore that you use equipment at your own risk without liability on behalf of the club or its members.

Signature _____ Date _____

Parent's Signature (if under 18) _____ Date _____

FOR OFFICIAL USE ONLY

100m swim Authorised _____ Date _____

Capsize training Authorised _____ Date _____

Introduction Authorised _____ Date _____

Induction course Authorised _____ Date _____

Membership Authorised _____ Date _____

No supervision reqd Authorised _____ Date _____

Lifting training Authorised _____ Date _____

Small boats Authorised _____ Date _____

Life Jackets (Under 16s only) Authorised _____ Date _____

Other applicable info. Qualifications etc ARA, NCF, First Aiders