|  |  |
| --- | --- |
| **Venue: EDYC** | **Course 2, Youth Week 4th – 8th July 2022** |
| **Participant name(s)**  |   |
| Dates and session times  | **Youth members of EDYC only.****4th – 7th July 2022, 09:30 – 17:00****8th July 2022, 09:00 – 15:30** **Weather permitting**  |
| Course Coordinator  | **Gordon Reid for****edycprincipal@gmail.com**  |
| Course details: We plan to offer the RYA Youth Sailing Scheme Stages 1-4 (Beginners to Competent Sailors). The course will be supported by EDYC’s team of Assistant Instructors. |
| **Youth Sailing Scheme, Stage achieved before course** |  |

**About your sailing ability**

|  |  |
| --- | --- |
| Please state the highest relevant sailing qualification held |  |
| Please confirm that you can do these or delete what does not apply. | * swim 25 metres and are confident in the water,
* can recover a capsized dinghy
 |

**Medical questions**

|  |  |
| --- | --- |
| In the interests of your safety do you have any medical conditions or physical or mental impairments that EDYC needs to be aware of that may affect your ability to take part in the Course?  |  |

Because the number of places available is likely to be limited by the boats and the number of instructors available, EDYC intends to accept bookings according to the following priority:

1. Children, who have not attended a sailing course previously (i.e. novice sailors), **and**
	1. Are children of family members (i.e. not on an introductory discounted membership offer); or
	2. Cadet members.
2. Children who have limited sailing experience (RYA Youth Sailing Scheme 1 or 2), **and**
	1. Are children of family members (i.e. not on an introductory discounted membership offer); or
	2. Cadet members.
3. Children who have completed RYA YSS Stage 3 **and** are prepared to sail double handed while completing Stage 4, **and**
	1. Are children of family members (i.e. not on an introductory discounted membership offer); or
	2. Cadet members.
4. Children of Members who are training as Assistant Instructors and are willing to sail double handed.

# Booking details

**Please send a copy of the completed form to** **edycsec@gmail.com**

**I wish to book \_\_\_\_\_ place(s) at a cost of £180 for the first household member, and £145 per person for additional members from the same household, total £\_\_\_\_\_\_.**

**An invoice for this amount will issue. Bookings will not be confirmed until payment has been received and a receipt issued. Please make payment to:**

EDYC Ulster Bank account**, Sort Code: 98-00-90 Account: 20135095, stating the course number and name of the participant.**

**I confirm that:**

* **I have signed and will comply with the booking conditions for training courses Summer 2022,**
* **The details given in this booking form are correct, and**
* **I confirm that no one in my household will have shown the signs or symptoms of COVID 19, and I will withdraw my household from the course immediately if those conditions are not met. The Club will retain any fees paid.**

Signed (Participant/Parent/Guardian) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_

Your booking will be acknowledged from the edycsec@gmail.com account.

Following your participation in the course please provide feedback to

**https://www.surveymonkey.co.uk/r/ZKS8DGV**

# MEDICAL INFORMATION AND IMPAIRMENTS

**Participants’ name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Course “Summer Training 2022” Session Dates \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please provide details below if you declared that your child has a medical condition or physical or mental impairment that EDYC needs to be aware of because it may affect their ability to take part in the Course.

SPECIAL CATEGORY DATA

I confirm that I have given EDYC the medical information listed on this page (if any) for the purposes of my child’s participation in the Course. I understand that this information will only be used for that purpose and will be retained for as long as necessary to comply with EDYC’s legal obligations and may be made available to any relevant public authority.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_