

## 2019 EDYC Youth RIB Training Entry Form

Please complete and send to your Club EDYC

Region:	Northern Ireland
Name of your RYA affiliated o	lub, organisation or training centre:  East Down Yacht Club
Participant Contact Deta	ails:
Name:	
Address:	
	Postcode:
Home phone no:	
Mobile no:	
E-mail address:	
Date of birth:	Age on 17 <sup>th</sup> September 2019
About You:	
Do you have any previous boati	ing experience or qualifications?
·	tions that may affect your ability to take part?
	gnancy, asthma, angina or other heart conditions, nervous
disorders)	
Can you swim 25 metres?	
Please give the name of a pare	nt or guardian who will be in attendance:
Telephone no. (in case of emer	gency):
Please use this space to give us	s any additional information you would like us to be aware of:

Parent/Guardian Contact Details:		
Name:		
Address:		
Postcode:		
Home phone no:		
Mobile no:		
E-mail address:		
Conditions of Entry		
I understand that power boating is by its nature an unpredictable sport and inherently involves an element By taking part in the training I accept responsibility for exposing myself to such inherent risk. I agree comply at all times with the instructions of the supervisor in the boat, particularly with regard to the had the boat, the wearing of my buoyancy aid, and the wearing of suitable clothing for the conditions.	to	
I understand that the organisers may cancel the event at any time in the event of bad weather or if an equipment becomes unfit for use in such a way as to make the event dangerous for participants.	y of the	
I accept responsibility for any injury, damage or loss to the extent caused by my own negligence.		
I agree not to participate in the event whilst my ability to drive a boat is impaired by alcohol, drugs otherwise unfit to participate.	or whilst	
Signed:Date:Date:		
Declaration by parent or guardian		
I have agreed that may take part in this training. I confirm that I have read throu conditions with him/her and that he/she understands and agrees with them. I also confirm that he/she entraining with my full agreement and that the particulars given above are correct and complete in all respects	ters this	
Signed:Date:Date:		
Consent form for the use of photography or video		
EDYC & RYA recognise the need to ensure the safety and welfare of children and young people taking par In accordance with our child protection policy we will not arrange for photographs, video or other images people to be taken without the consent of the parents/carers and children.		
EDYC & RYA will follow the guidance for the use of images, a copy of which is available from EDYC or from Jackie Reid, RYA Child Protection Co-ordinator, Tel: 023 8060 4104, e-mail jackie.reid@rya.org.uk. will take all reasonable steps to ensure that images are used solely for the purposes for which they are into you become aware that images are being used inappropriately you should inform Jackie Reid.		
Consent		
I (name of parent/guardian)		
Signed:Date:Date:		