Date of Induction:....

## Welcome Form for New Paddlers

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It's great to have the opportunity to welcome you to our club and provide the opportunity for you to paddle with us. Please complete this form prior to getting on the water.

## **Personal Details**

MR/ MRS/ MISS/ MS OTHER:			
First Name:	Surname:		
Address:	Telephone Number:		
	Mobile Number:		
Post Code:	Email Address:		
Date of Birth:	Consent to receive news/updates from CCC: Yes / No		
Next of kin			
First Name:	Surname:		
Telephone Number:			
Mobile Number:			
Relationship:			
Medical Details			
Medical Condition	Medication Taken:		
Further Details:			
<b>Declaration</b> (please sign below only whe	en you have read and fully understood the following statements)		

- Chichester Canoe Club does not require you to detail any personal medical conditions. However, it is
  your individual responsibility to ensure that the leader of any activity is fully aware of any medical
  condition. Failure to do so could compromise the safety of you and others in the group.
- All persons named above can swim 50 metres, wearing an approved buoyancy aid if necessary (you
  may be asked to demonstrate this ability)
- Canoeing is a potentially dangerous sport and I understand there is an element of risk involved.

Signed	Date:	This data will be held for club purposes only