



Joining Pack

Please complete the attached forms and return them to the Royal Torbay Yacht Club office. We will then make arrangements with you to setup the direct debit.

If you have any questions, please call us on 01803 292006 or email admin@rtyc.org.

Please note: We need a separate booking form for each child.



Royal Torbay Yacht Club

squadron13
RTYC YOUTH SAILING



Junior and Youth Sailing Booking Forms

Name: _____

Booking and Parental Consent form

Squadron 13 Saturday Training Sessions

EVENT DETAILS

Event name	<i>Squadron 13 – Saturday Club</i>
Venue	<i>Royal Torbay Yacht Club</i>
Event Coordinators	<i>Simon Barnett (SI) / Steve Huish (PB Instructor)</i>

PARTICIPANT CONTACT DETAILS

Name	
Date of Birth	
Address	
Contact no.	
Email address:	
If you are under 18, your parent or guardian must complete and sign the Parental/Guardian Agreement Form	

ABOUT YOU

Do you have any previous boating experience or qualifications? If yes, please give brief details.	
Can you swim 25 metres?	
In the interests of your safety do you have any medical conditions or physical or mental impairments that the organiser needs to be aware of that may affect your ability to take part in the Event?	Yes/ No If you answer yes please provide further details in the Medical Information and Impairments section of this form
Telephone number of emergency contact.	

BOOKING TERMS

1. RISK STATEMENT

It must be recognised that sailing is by its nature an unpredictable sport and therefore inherently involves an element of risk. By taking part in the Event, you agree and acknowledge that:

- (i) You are aware of the inherent element of risk involved in the sport and you accept responsibility exposing yourself to such inherent risk whilst taking part in the Event;
- (ii) You will comply at all times with the instructions of the Event Co-ordinator particularly with regard to handling of boats, wearing of buoyancy aids and the wearing of suitable clothing for the conditions;
- (iii) You accept responsibility for any injury, damage or loss to the extent caused by your own negligence;
- (iv) You will not participate in the Event if your ability to participate is impaired by alcohol, drugs or if you are otherwise unfit to participate;
- (v) You will inform the Event Co-ordinator if there have been any changes to the information provided on this form at the time of the Event.
- (vi) The provision of patrol boat cover is limited to such assistance as can be practically provided in the circumstances;
- (vii) You are aware of any specific risks drawn to your attention by the Event Co-ordinator.

2. CANCELLATION

You understand that the Event Co-ordinator may cancel or postpone the Event at any stage in the event of bad weather, equipment failure or otherwise.

3. MISCONDUCT

You understand that the Event Co-ordinator may exclude anyone from a particular session and evict anyone from the premises who refuses to comply with these Booking Terms or who misconducts themselves in any way or who causes damage or annoyance to other persons.

4. DATA PROTECTION

The Organiser has a Data Privacy Policy which can be found at <http://rtyc.org/privacy/>

Your data will be stored and used in accordance with that policy.

The information you provide in this form will be used to facilitate your participation in the Event and to contact you. The Organiser would also like to include your contact details on a mailing list in order to make you aware of future events. We might also use social media channels to contact you or group messaging services Eg WhatsApp. This will be for the transfer of information relating to the training event.

If you would like to be included on this mailing list please tick here

If you wish to withdraw your agreement at any time, please contact admin@rtyc.org

AGREEMENT

I confirm that I have read and fully understand the above Booking Terms and agree to comply with them.

Signed..... (The Participant) Date.....

PARENTAL/GUARDIAN AGREEMENT

(to be completed if the participant is aged under 18)

Name of participant	
Name of parent/guardian completing this form	
Relationship to participant	
Contact number during Event	

Medical treatment

I give permission to the organisers to administer any relevant treatment or medication to the above-named participant when or if necessary.

In an emergency situation I authorise the organisers to take my child to hospital and give my full permission for any treatment required to be carried out in accordance with the hospital's diagnosis. I understand that I shall be notified, as soon as possible, of the hospital visit and any treatment given by the hospital.

Use of your child's image

The Organiser may arrange for images or videos to be taken at the Event and published on the Event or Organiser's website or social media channels to promote the Event or Organiser.

If you agree to the use of images of your child being used for this purpose, please tick here.

If you agree to the use of images of your child being used, please confirm below that your child is not under a court order which may prevent their image being published.

I confirm that my child is not under a court order which may prevent their image from being published.

If you later wish to withdraw your agreement, please contact admin@rtyc.org Please be aware that if you later decide to withdraw your agreement it will not be possible to remove your image from any printed material in circulation, or until the next edition or print of the item containing your image is released.

By agreeing to images being used, you agree to assign any copyright or any other right of ownership of these images to the Organiser.

Permission for Child to leave Club

If you agree to your child being able to make their own way home from Royal Torbay Yacht Club please tick here.

If you will collect your child from the Royal Torbay Yacht Club after training events please tick here

PARENTAL/GUARDIAN AGREEMENT (if under 18)

I agree that _____ may take part in the Event. I confirm that I have read through the above conditions with him/her and that she/he understands and agrees with them. I also confirm that he/she takes part in the Event with my full agreement that that the particulars given above are correct and complete in all respects.

Signed.....Parent/Guardian.....

Date.....

MEDICAL INFORMATION AND IMPAIRMENTS

If you declared that you have a medical condition or physical or mental impairment that the organiser needs to be aware of because it may affect your ability to take part in the Event please provide details below.

SPECIAL CATEGORY DATA

I confirm that I have given the Organiser the medical information listed on this page (if any) for the purposes of my participation in the Event. I understand that this information will only be used for that purpose and will be retained for as long as necessary to comply with the Organiser's legal obligations.

I agree/ I do not agree (Please circle)