



Summer Camp Registration Form : Completion Instructions

To help our volunteers process your registration correctly please can you ensure the following :

- All four pages of the form are completed in full
- The medical declaration on page 3 is complete and you have provided any relevant information so our coaches are prepared
- You have signed on pages 2, 3 and 4

Once completed and signed electronically please return this form to suabc.summercamps@gmail.com

For help in signing electronically please see : <https://helpx.adobe.com/uk/acrobat/using/fill-and-sign.html>

If you are unable to sign electronically, please submit by e-mail and post signed copies to the club at Stratford-upon-Avon Boat Club, Swan Nest, Stratford-upon-Avon CV37 7LS

Once your form and payment are received you will receive an e-mail confirming your allocated place noting it may not always be possible to allocate your 1st choice.

We look forward to seeing you this summer at SuABC.



Summer Camp Registration Form

Athlete Details:

Athlete's full name			
Address			
	Postcode		
Home ☎		Mobile ☎	
Email		Date of birth	
School		Year Group (as of 1 st September 2019)	

Camp applied for: (please list in order of preference and mark any weeks not available)

Camp A	29 th July – 2 nd August	Preference	Camp C	12 th August – 16 th August	Preference
Camp B	5 th August – 9 th August	Preference	Camp D	19 th August – 23 rd August	Preference

Please indicate if you would like to be on the same camp as any other attendees (unfortunately we cannot guarantee you will be allocated to the same week):

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Please give details of previous rowing experience (if any):

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Parent/guardian details:

Full name			
Address (if different from above)			
Home ☎		Mobile ☎	
Work ☎		Email	



Summer Camp Registration Form (cont'd)

Preferred emergency contact details:

1 st emergency contact			
2 nd emergency contact			

Payment details:

I have made payment of the camp fee of £195 via bank transfer to the account below:

Account sort code: 60-20-41
Account number: 43808689
Account name: Stratford Boat Club Membership
Bank: NatWest, Stratford-upon-Avon Branch

Please use the word **CAMP** followed by the camp attendee's **INITIAL+SURNAME** as a reference

IMPORTANT : your place will not be allocated until payment has been received.

Name : _____ Date: _____

Signed : _____

Please complete and sign electronically and return this form to the following address:
suabc.summercamps@gmail.com

Once payment is received you will receive an e-mail confirming your allocated place,
it may not always be possible to allocate your 1st choice.



Parental Permission for Juniors

Videos

From time to time your child may be videoed rowing or sculling. The video would be used as a coaching aid for improving technique and would be viewed (usually with other members of the crew present) on the TV at the clubhouse. Occasionally videos may be taken as part of coach development e.g. some coaching awards requires the coach to supply videos of crews for the practical assessment. In such cases the video would be viewed by 'British Rowing' assessors as well as the coach and children in question.

Photographs

Still photographs are sometimes taken to be used as a coaching aid (as described above for videos) Photographs may also be published on the Stratford Boat Clubs web site or in the local press. Some photographs may be taken at social events, regattas and award ceremonies as well as training or competing.

Swimming Ability

In order to take part in rowing activities safely your child should be a competent swimmer able to swim at least 50 metres in light clothing and shoes and tread water for 5min. If there is any doubt about your child's ability we will arrange for them to wear a lifejacket/buoyancy aid until a suitable swim test can be arranged and successfully completed.

Health

Rowing is a strenuous physical sport. Your child should not undertake this activity unless he/she is in good health. If in any doubt you should always consult with your doctor. Your child should not train or compete if he/she is ill. If your child is not feeling well or has recently been ill you should always inform your child's coach. You should also inform the coach/club immediately if there is any change in your child's health, medication taken or emergency contact numbers.

Declaration *(select from dropdown list)*

I am happy for my child to be videoed for the purposes described above [YES / NO]		
I am happy for my child to be photographed for the purposes described above [YES / NO]		
My child can swim at least 50 metres in light clothing [YES / NO]		
I agree to my records being stored electronically [YES / NO]		
I confirm my child does not have any medical conditions or special needs that may be relevant to rowing e.g. Allergies, Epilepsy, Heart conditions, learning difficulties etc. [YES / NO] If NO give details below along with information on any medication taken		
Parent/guardian's name		
Signed		
Date		



Parental Declaration for Medical Treatment and Medication

Any medication must be carried by child or parent at all times. It should be understood that coaches cannot administer medication and can only supervise a child who is taking medication.

I understand that in the event of injury or illness all reasonable steps will be taken to contact me.

Having responsibility for the child named below, I give permission for first aid to be administered or, where considered necessary, treatment given by a suitably qualified medical practitioner.

If I cannot be contacted and my child should require emergency hospital or dental treatment, I authorise a qualified medical practitioner to provide such treatment and/or medication.

Athlete's name	
Athlete's date of birth	
Parent/guardian's name	
Signed	
Date	