

Open Water Swimming Parental Consent Form

NAME OF RESPONSIBLE ADULT:

NAME OF CHILD:

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YOUR ATTENTION IS BROUGHT TO THE FOLLOWING WHICH YOU SHOULD READ CAREFULLY AND ENSURE THAT YOU UNDERSTAND.

I except full responsibility of the above child whilst attending open water swimming at the QE2 lake. I declare I will swim with the child above and not leave them unattended at any point during the swimming session.

I declare that I am a competent swimmer and that there are no medical reasons why I should not participate in the open water swim session. I agree to participate at my own risk the extent of which I fully appreciate. I accept that no liability whatsoever will attach to the session organiser's for any injury, death, loss and/or any other claim whatsoever and howsoever arising by reason of my participation in the open water swim session. I agree for my details to be held electronically for the purpose of OWS sessions, OWS coaching and future events. They may not be provided to any other organisation or used for any other purpose.

SIGNED:

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DATE:

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