



Kayaking Application Form

Activity: _____
(E.g. Annual Membership, Beginners Course, Kayak & BBQ etc.)

Date: _____

PLEASE COMPLETE ALL FIELDS. PRINT IN CAPITAL LETTERS ONLY

Name: _____	Date of Birth: _____
Address: _____	
Mobile No: _____	E-mail: _____
Garda Vetting:	It is a legal requirement that all instructors and ordinary members participating with children are Garda vetted. Please present your Garda Vetting confirmation letter to a Child Protection Officer. Please contact a Committee member for more information if you are not Garda Vetted.
Medical Emergency: Strike Through A or B	I consent to myself / a child in my care, receiving appropriate first aid or medical treatment which in the opinion of a qualified medical practitioner; is necessary.
A)	I give consent to ANY medical treatment to be provided in the event of an emergency.
B)	I give consent for any medical treatment to be provided EXCLUDING: _____
Medical Conditions:	Do you or a child in your care have a medical condition that may put you / them at risk when kayaking? Do you / they require medication / treatment? Yes / No
If Yes, please give details here:	Conditions / Medication: _____ Method / Dose (e.g. epi pen, inhaler): _____
You <u>must</u> inform the Lead Instructor before <u>each</u> event of any condition / medication you have. An existing medical condition may not necessarily preclude you from membership or participation, but it must be declared.	
Emergency Contact: _____	Mobile: _____ Relationship: _____

Note: Members contact details are forwarded to *Canoeing Ireland* for insurance registration with our national body.
All new members may have their skills tested, and must demonstrate a proficient capsized with a spray deck.

Information for Kayakers and Guardians is on display in the clubhouse, if you have any questions not covered by these documents, contact an Instructor / Committee member for confirmation. Please familiarise yourself with:

Child Protection Policy, Parent / Guardian Information Leaflet, Safety Policy, Club Information Booklet.

Club activities may be photographed and published in the public domain or online. Please inform the club if you object to this, or if a child in your care, is subject to a court order prohibiting access OR publication of their image.

**Registration Forms must be completed in full, prior to the activity commencing.
Course participants become temporary members of Phoenix Kayak Club for the duration of the activity.**

PKC Kayaking Consent
Form Rev12-22Nov2016
Author: P Heffernan



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Training: To enable focused training provision, please advise your proficiency and certification expiry dates.

Discipline:	Proficiency Level:	Trainee Instructor:	Instructor Level:	RSR Level	REC - First Aid Level / Expiry
River					
Sea					
Canoe					
Surf Kayak					

Storage: Members may apply to store a maximum of two kayaks at the club-house, space is limited and allocated annually on a first come, first served basis. Storage of private equipment is at the owner's risk, you are advised to arrange your own insurance cover. By applying to store equipment you acknowledge and accept these conditions and agree to abide by any future changes deemed necessary by the committee. Please indicate if you wish to apply for storage space below.

Annual Kayak Storage Fee	River / Playboat up to 2.75m long	Sea / Racing over 2.75metres long
1 Kayak €30 / 2 Kayak's €50	Qty:	Qty:

Payment Cash, cheque, bank draft, postal order or direct bank transfer (SEPA). If paying through the SEPA system please clearly state name / reason for transfer to identify your payment.

Methods:

BIC: IPBSIE2D **IBAN:** IE98IPBS99071322519705

Note: A deposit of €50 is required to reserve a participants place on all courses.

I accept that canoeing & kayaking is an adventurous sport that involves risks, dangers and hazards that may result in personal injury or death. I accept these risks and agree to be responsible for my own actions and involvement. I accept that Phoenix Kayak Club cannot be held liable for any personal or financial injury caused to me, or caused to others, or their property by me, due to my participation or involvement in this sport.

I confirm that I can swim at least twenty-five meters and am proficient and comfortable treading water. I do not suffer from any disability or medical condition that may render me unfit for strenuous exercise. I agree to abide by the Club constitution, terms, conditions and policies introduced by the executive committee for the betterment of the Club.

Signed: _____
(Parent / Guardian if under 18)

Name (Print): _____

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