

Junior Membership & Parental Consent Form



Personal details

Child's Name.....

Address
.....
.....

Post code

Tele number.....

D.O.B.....

Medical Information. Does your child have any medical conditions/allergy's? YES / NO. If yes please give details

.....
.....
.....

Emergency contact. (Name).....

Home Tele..... Mobile

Address

.....
.....

Post code

Photography.

Do we have your permission for your son/daughter to be photographed, so they may have a record of their achievements or for possible promotional purposes? YES / NO.

Can your child swim? Please tick where appropriate.

0m

25m

50m

100m

Declaration of consent. I acknowledge the need for my child to behave responsibly during all activities, he/she will arrive wearing suitable clothing and I will ensure he/she will be collected or are able to make their own way home safely. I have read, understand, and agree to all of the above.

Signed.....Print.....Date.....