

## Consent Form

### **TCYC RS TERA Open Sunday 7<sup>th</sup> June 2015 Consent Form for Juniors, Helm (Under 18 on September 7th June 2015)**



I agree to my son/daughter taking part in the TCYC RS TERA Open 2015:

Name of Parent/Guardian	
Address	Telephone Numbers:
	Home
	Work
	Mobile
Name of Son/Daughter	
Your son/daughter has no significant medical conditions and will not require any medication during the Regatta.  Agree? Yes/No	If No: My son/daughter suffers from the following conditions and will require medication/treatment as follows:

In an emergency, if I cannot be contacted, please contact:

Name of Alternate	
Address	Telephone Numbers:
	Home
	Work
	Mobile

In the event of an accident/acute illness I give my consent to my son/daughter receiving emergency medical treatment.

I consent to my child being photographed or videoed during the regatta.

Signed:.....

Date:.....