

Starcross Yacht Club – Sailing Instructions
Annex A – Parent / Guardian Consent Form

Starcross Yacht Club
Consent Form for Juniors

[A junior is defined as a person under the age of 18 on the date of the Event]

Please complete a form for each junior.

I agree to my son/daughter taking part in :

| | | | |
|--------|-------|--------|-----------|
| Event: | Date: | Class: | Boat No.: |
|--------|-------|--------|-----------|

| | | |
|---|--|--|
| Name of Parent/Guardian: | | |
| Name of Son/Daughter: | | |
| Address: | | |
| Phone (Home): | Phone (Work): | Phone (Mobile): |
| My son/daughter has significant medical conditions. Please circle the answer which applies. NO YES | My son/daughter may require medication during the event. Please circle the answer which applies. NO YES | If you answered YES to any of the questions on the left – please give details: |

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

| | | |
|-------------------|--------------|----------------|
| Name of Alternate | | |
| Address | | |
| Phone (Home) | Phone (Work) | Phone (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 event.

Signed:

Dated: