**GYM CONSENT FORM**

**Member’s details**

|  |  |
| --- | --- |
| Name | Membership: Kayak-Canoe / Rowing |
| Date of Birth | ☐ Junior |
| Gender | ☐Male ☐Female ☐Other ☐Prefer not to say |

**Medical Conditions**

*Please give details of any medical conditions or disabilities that the coaches should be aware of, including any medication (e.g. inhaler, epi-pen). If none, please write “none”.*

|  |
| --- |
|  |

**Consent**

☐ I agree to me / my child taking part in gym activities at Falcon Boat Club

☐ I consent to me /my child receiving first aid and medical treatment which, in the opinion of a qualified medical practitioner, may be necessary

☐ I understand that the FBC trustees accept no liability for any injuries, damage or loss, however caused, while using the gym

☐ I have or will have completed a gym induction session by FBC approved persons (John Hill, Jess Long) before using the gym

☐ I undertake to comply with any current and future rules of gym usage as decided by FBC

|  |  |
| --- | --- |
| Name of person giving consent |  |
| Date |  |
| Email address |  |
| Signature |  |

**Emergency Contact Details**

|  |  |  |
| --- | --- | --- |
|  | Main contact | Alternative contact |
| Name |  |  |
| Relationship to member |  |  |
| Phone number |  |  |

Email completed form to: [gym@falconboatclub.org.uk](mailto:gym@falconboatclub.org.uk)