

## 2014 Entry Form

Please complete and send to your Regional Co-ordinator

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Your Contact Details:			
Name:			
Address:			
Home phone no:			
Day phone no:			
Mobile no:			
E-mail address:			
Date of birth:	Age on 15 <sup>th</sup> September 2014:		
About You:			
Do you have any previous boating experienc	e or qualifications?		
Do you have any medical conditions that ma	v affect your ability to take part?		
·	ma, angina or other heart conditions, nervous		
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Can you swim 25 metres?			
,	n who will be in attendance:		
Can you swim 25 metres?	n who will be in attendance:		
Can you swim 25 metres?	n who will be in attendance:		
Can you swim 25 metres?  Please give the name of a parent or guardia  Telephone no. (in case of emergency):	n who will be in attendance:  nal information you would like us to be aware of:		

## Conditions of Entry

I understand that power boating is by its nature an unpredictable sport and inherently involves an element of risk. By taking part in the Championship I accept responsibility for exposing myself to such inherent risk. I agree to comply at all times with the instructions of the supervisor in the boat, particularly with regard to the handling of the boat, the wearing of my buoyancy aid, and the wearing of suitable clothing for the conditions.

I understand that the organisers may cancel the event at any time in the event of bad weather or if any of the equipment becomes unfit for use in such a way as to make the event dangerous for participants.

I accept responsibility for any injury, damage or loss to the extent caused by my own negligence.

I agree not to participate in the event whilst my ability to drive a boat is impaired by alcohol, drugs or whilst otherwise unfit to participate.

I understand that the organisers may exclude anyone from the competition and evict anyone from the premises who refuses to comply with these conditions or who misconducts themselves in any way or who causes damage or annoyance to other persons.

I understand that the decision of the judges is final in all circumstances and that neither the RYA, nor Honda or Highfield have any jurisdiction to hear any appeal against the decision of the judges.

Signed:	Competitor name:	Date:	
Declaration by parent or guardian			
I have agreed that			
Signed:	Parent/Guardian:	Date:	
Consent form for the use of photography or video			
The RYA recognises the need to ensure the safety and welfare of children and young people taking part in boating. In accordance with our child protection policy we will not arrange for photographs, video or other images of young people to be taken without the consent of the parents/carers and children.			
The RYA will follow the guidance for the use of images, a copy of which is available from your Regional Co-ordinator or from Jackie Reid, RYA Child Protection Co-ordinator, Tel: 023 8060 4104, e-mail <a href="mailto:jackie.reid@rya.org.uk">jackie.reid@rya.org.uk</a> . The RYA will take all reasonable steps to ensure that images are used solely for the purposes for which they are intended. If you become aware that images are being used inappropriately you should inform Jackie Reid.			
Consent			
I (name of parent/guardian)		consent to the RYA	
photographing or videoing (child's	s name)	during the Honda RYA	
Youth RIB Championship 2014 and I agree that such images may be used in the RYA Magazine, on the RYA website and in the promotion of the Honda RYA Youth Rib Championship without consultation or payment.			

Signed:......Date:.....Date: