



CRAIGAVON CANOE CLUB MEMBERSHIP FORM

To ensure we have the correct contact details for you, please fill out this form and give it back to *the club co-ordinator*.

If you are under 16, please also ask your parent or carer to sign the form before it is returned. We will also use this information to ensure that you are kept informed about club events.

Please complete a form for every individual member.

Name	
Address	
Phone number	
Date of Birth	
Email	

Whilst it is not compulsory that the following section is completed C3 prides itself in being open to all members of our community and it is important the club is able to demonstrate this to funders and relevant governing bodies.

Ethnicity

In order to help the club monitor its membership please will you tick one of the following boxes to identify your ethnic group/origin.

• White

British

Irish

Any other white background (please specify)

B. Mixed

White & Black Caribbean

White & Asian

White & Black African

Any other mixed background (please specify)

C. Asian or Asian British



Indian
Pakistani
Bangladeshi
Any other Asian background (please specify)

D. Black or Black British

Caribbean
African
Any other Black background (please specify)

E. Chinese or other ethnic group

Chinese
Any other (please specify)

Disability

The Disability Discrimination Act 1995 defines a disabled person as anyone with 'a physical or mental impairment, which has a substantial long-term adverse effect on his or her ability to carry out normal day-to-day activities'.

Do you consider yourself to have a disability? Yes No

Please detail below any important medical information that our coaches/junior coordinator should be aware of

Visual impairment
Hearing impairment
Physical disability
Learning disability
Multiple disability
Other (please specify)

Sporting information

Have you any previous experience of canoe or kayaking? Yes No

If yes, where?(please indicate below)

Primary school
Secondary school
Coaching session(s)
Club
Other (please specify)



Medical information

Please detail below any important medical information that our coaches/
Junior Coordinator should be aware of (e.g. epilepsy, asthma, diabetes etc.)

Emergency contact details

To be completed by the parent/carer

Please insert the information below to indicate the person(s) who should be
contacted in event of an incident/accident.

Contact name e.g. parent/carer

Emergency contact number

By returning this completed form, I agree that I or/and my son/daughter/child in my
care taking part in the activities of the club.

I understand that I will be kept informed of these activities – for example
timing and transport details.

I understand in the event of injury or illness all reasonable steps will be taken
to contact parents and next of kin, and that club leaders will deal with that injury/illness
appropriately.



Participation statement

Important. Please read carefully.

C3 Paddlers is run by professionally trained and experienced coaches and leaders however there are significant elements of risk in any adventure sport or activity associated with the use or presence of water craft, including but not limited to canoes and kayaking, rafts, and tubes, and the use of related equipment. **C3 Paddlers recognises these activities carry with them a danger of personal injury or death. Participants in these activities should be aware of and accept these risks and be responsible for their own actions and involvement.** These risks are inherent in canoeing and kayaking and as with all risk, it can never be eliminated. By signing this form you agree to and accept this risk.

Name of participant or parent/carer if a junior:

Signature of parent/carer:

Date: