

**Falmouth Canoe Club**

**BCU Affiliation No :001174/A**



Membership Form- Please use block capitals

Name:.....

Address:.....

.....Post Code :.....

Tel:.....

DOB: :..... Paid:.....

FCC Membership Number: ..... Valid from:..... to:.....

I agree to abide by Falmouth Canoe Club's Rules & Regulations .....

**Parental Consent (If Under 18 Years of Age)**

This part of the membership form has been produced for parents/guardians of children/young people under the age of 18 years with regard to canoeing at the Falmouth Canoe Club and gives necessary authority for British Canoe Union qualified Instructors from Falmouth Canoe Club to take your child on open water canoeing in the Falmouth Harbour are, and at other locations. PLEASE NOTE that in signing this form your rights are not affected in any way.

I wish my son/daughter.....  
to be allowed to take part in canoeing activities at the above mentioned places. I have read all the information provided

1. I consent to any emergency medical treatment required by my child during the course of canoeing.
2. I confirm that my child does not suffer from any medical condition requiring regular treatment OR my child suffers from:

.....  
requiring regular treatment (eg diabetes, asthma). If your child suffers from a particular complaint, please enclose a letter giving details of the complaint and its treatment.

Signature of Parent/Guardian..... Date .....

Address.....

.....Telephone number.....