

PARENT/GUARDIAN CONSENT AND SUPERVISION FORM

NSSA NATIONAL YOUTH REGATTA Hosted by Draycote Water Sailing Club Sunday 23rd - Saturday 29th July 2023



This form must be completed for all competitors and signed by the Parent/Guardian of the young person and NOT their representative

Name of Team				
Name of Competitor		NSSA Membership No.		
Medical Information	Please identify all medical conditions, or medication being taken, which organisers should be aware of. If non, please state none -Continue overleaf if more space is required.			
Other Useful Information				

SUPERVISION (if applicable)

I appoint the person named below, who will act in loco parentis for my dependant. He/she will be responsible for my dependant throughout the event, and during the time that my dependant is afloat, he/she will be available at the event venue.

Name of Person in Loco Parentis	
Contact Mobile Number	

RISK STATEMENT

Sailing is by its nature an unpredictable sport and therefore inherently involves an element of risk.

By allowing my dependent to participate in racing, I, the parent/guardian of the competitor named above agree and acknowledge that:

- a) I am aware of the inherent element of risk involved in the sport and accept responsibility for exposing my dependent to such inherent risks.
- b) I have satisfied myself that my dependent has the necessary skill and knowledge to take part in this event and to deal with conditions that may arise in the course of a race.
- c) The team manager will not allow my dependent to participate in racing whilst under the undue influence of alcohol, drugs or whilst otherwise unfit to participate.
- d) The team manager is responsible for ensuring that the boat is in good order, equipped and insured (including third party insurance of at least £3 million).
- e) The team members are responsible for their own property, whether afloat or ashore;
- f) I accept responsibility for any injury, damage or loss to the extent caused by my own actions or omissions or actions or omissions of my dependent.
- g) The provision of a race management team, safety fleet and other officials and volunteers does not relieve me of my parental/guardianship responsibilities or my dependent of his/her responsibilities.
- h) The provision a safety fleet is limited to such assistance, particularly in extreme weather conditions, as can be practically provided in the circumstances.

ACCEPTANCE OF THE RULES AND BEHAVIOUR DURING THE EVENT

By allowing my dependent to participate in this event, I, the parent/guardian of the competitor named above agree and acknowledge that:

- a) My dependent is bound by the Notice of Race, Sailing Instructions, DWSC regulations, Site Rules and Racing Rules of Sailing (RRS).
- b) I am aware of the RYA Prescription to RRS Rule 3 and that my dependent may be penalised under the RRS for any misconduct on the part of my dependent's support persons.
- c) If my dependent behaves in a manner that is considered unacceptable by the organisers, including the consumption of alcohol or drugs at any time, I understand that I will be asked to collect my dependent within 12 hours from the venue listed above, and will not have entry or accommodation fees refunded.
- d) I consent to the taking of pictures and video during the event and waive any rights to payment for such images.

MEDICAL TREATMENT

If it becomes necessary for my dependent to receive medical treatment and the organisers are unsuccessful in contacting me, I hereby give my consent to any necessary medical treatment, and authorise the person appointed in loco parentis to sign any document required by the medical authorities. I also consent to my dependant participating in drug testing procedures and, if asked, providing a urine sample under observation for analysis at an accredited laboratory. I confirm that my dependant is medically fit to take part in the event and any supporting activities on the above dates. I have listed above and medical conditions for my dependant that the organisers should be aware of.

Name of Parent / Guardian			
Parent / Guardian Telephone Numbers	Mobile	Home	
Signature of Parent / Guardian			