



TUFF FITTY

TRIATHLON CLUB

Membership Application:

Name:

Address:

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Post Code: Date Of Birth:

BTF Number (If Applicable):

Home Tele no:..... Mobile Tele no:

E-Mail Address:

I would like to apply for membership of Tuff Fitty Triathlon Club & agree to pay any membership and training fees set by the club.

Signed:

I enclose payment for £..... (cheques made payable to Tuff Fitty)

Membership Fees: Adult £20
Family £30
Student/Junior £10
Postal Membership £10

Members are eligible for a FREE club polo shirt

Please ring your size: S M L XL

Participant Information and Parental Consent Form

For Those Participating in Coaching Sessions

This form supports the provision of evidence for Task 8. You can copy and use this form to collect, review and analyse participants' needs and record the information for Task 8. You will need to include written evidence for at least three participants from one session.

1 Participant Details

First name:		Surname:			
Gender:	<input type="checkbox"/> Female <input type="checkbox"/> Male	Date of birth:		Age:	
Address:			Postcode:		
Home tel:			Mobile:		
Email:					
Triathlon club (if appropriate):					

2 Emergency Contact Details

First name:		Surname:	
Relationship to participant:		Home tel:	
Work tel:		Mobile:	

3 Medical and Specific Needs

Please give details of any medical or health conditions that might affect your participation in triathlon and what support/modifications are needed.
Please list any medications you take on a regular basis.
Please give details of any specific needs that the coach should be aware of and what support/modifications are needed.

4 Other Participant Information

Previous triathlon experience:
What other sports do you participate in regularly and how often?
Why are you attending the sessions?
What do you want to achieve in the sessions?
In the long term, what do you want to gain from your participation in triathlon?
Please detail any other specific information that is relevant to your participation in triathlon activity sessions.

5 Consent for Participation in Coaching Activities

Parental/guardian consent

I, being the parent/guardian of the child identified below, have read the information on this form and in the following notes and give consent for my child to take part in the coaching sessions. I understand and agree that my son/daughter/child in my care, participates in coaching sessions under the instruction of British Triathlon coaches entirely at his/her own risk. I have considered the nature of such sessions and have discussed them with my son/daughter/child in my care. I am satisfied that they are sufficiently responsible and competent to assume full and entire responsibility for their own safety under the supervision of a British Triathlon coach.

Notes:

- You are giving consent for the child named below to participate in coaching sessions.
- It is part of the Code of Practice for Triathlon Coaches to ensure that reasonable steps are taken to establish a safe environment where young participants can enjoy developing their triathlon skills. The parent(s)/guardian(s) is welcome to stay and watch the session, but this is not compulsory.
- Young participants are expected to remain in the session from beginning to end, unless they have to leave early. If the participant has to leave early or is being collected by someone other than the parent/guardian, the parent/guardian must advise the coach of the details of the arrangement, including who will be collecting the participant.
- Any young participants who persistently misbehave or put others in danger will be asked to leave the sessions and will not be allowed to attend in future.

Please ensure that you make a note of any medical conditions your child has/you feel the coach should know about in Section 3 of this form. If you have any concerns about your child participating in any form of physical activity, please consult your GP before giving permission for your child to take part in the coaching sessions.

Child name:			
Parent/guardian signature:		Date:	