|  |  |  |
| --- | --- | --- |
| Personal Information | | |
| First Name |  | |
| Last Name |  | |
| DOB |  | Gender \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Address |  | |
|  |  | |
| Contact Tel. Number |  | |
| Emergency Contact No. |  | |
| Email |  | |
|  | | |
| Further Information | | |
| Nature of disability |  | |
|  |  | |
| Medication taken |  | |
|  |  | |
| Other information (e.g.allergies) |  | |
|  |  | |
|  |  | |

Do you intend to swim? Yes/No (please circle)

Can you swim 20 meters unaided? Yes/No (please circle)

|  |  |
| --- | --- |
| If no, who will swim with you in the pool? |  |
|  |  |

|  |  |
| --- | --- |
| How do you normally travel to the club? |  |
| Transport tel. number |  |

**Photo Consent**

Horsham District Council would like to take photographs / short videos of this site / activity which may include images of the person named on this sheet. These images may be used for promotional purposes, for example to accompany a media release, or in our printed publications or website. If you are happy for us to use these images please circle your preferred options below, then sign and date the form where shown.

**To the Parent/Guardian Please circle**

1. If required, may we use these photographs in printed publications

produced by Horsham District Council (eg guides, leaflets, posters)? **Yes / No**

1. May we use these images on our website/social media pages? **Yes / No**
2. May we use these images to accompany a media release

about this event / venue? **Yes / No**

|  |  |  |
| --- | --- | --- |
| Signed |  | |
| Print Name |  |
| Date |  |