



Lisburn City Paddlers



Is anyone on the application form individual member of CANI? Yes / No (If yes please state who)

Can everyone on the application swim a minimum of 50 metres? Yes / No (If no please state who, this is for our information only. It is not a necessity and Buoyancy aids can be provided)

Medical Details

Name of Doctor

Doctor's Tel. No.

Doctor's Address

Please give details if any person on the application has:

- A) Any current medical treatment
- B) Any medical conditions e.g. diabetes, asthma
- C) Any Allergies e.g. to food, medication, anaesthetics etc
- D) Date of last anti-tetanus injection if known

Declarations

- 1.) We _____ acknowledge that canoeing is an extreme sport undertaken at our own risk we can confirm we do not suffer from any disability or medical condition that may render us unfit for strenuous exercise.* We understand that Lisburn City Paddlers cannot be held for any personnel injury loss or damage as a result of my participation in any club event except that which is the result of gross negligence and/or wilful or wanton misconduct.
- 2.) We _____ declare that we have not at any time, within the United Kingdom and its Dependencies, or in any other country or territory, been found guilty by a court of any offence concerning children or young people under 18 years of age, nor bound over, placed on probation, caution, or discharged conditionally or absolutely in relation to such offences we understand that we must inform the committee should this position change at any time.
- 3.) Please tick this box [] if you do not agree to Lisburn City Paddlers taking photographs, which will remain the property of Lisburn City Paddlers and may be used for promotional purposes.

* Should a medical condition exist this will not necessarily preclude you from membership participation but it must be declared. Should you be in any doubt advice should be sought from your family Doctor

WE HAVE READ AND UNDERSTAND THE DECLARATIONS

Signed (Adult responsible)

Date