



# THORPE BAY YACHT CLUB

## PARENT/GUARDIAN CONSENT AND DECLARATION FORM

Class and Sail Number:

Competitors(s):  Helm  Crew

Parent/guardian Declarations: (Required for all helms and crews who are under 18 years of age).

Under law, the above competitor is my dependent. I confirm the accuracy of the information contained in the Event Entry Form. I accept the Disclaimer of Liability in the Notice of Race that excludes the right to claim compensation in certain circumstances. During the event the boat sailed by my dependent will have a valid and current third party liability insurance of at least £2m or the equivalent in another currency. I confirm that my dependent is competent to take part.

I note that photographs may be taken during the event, both on and off the water, and I consent to these being published in Class publications and/or on the Class/Club website and / or Club publications as well as those of any authorised magazines and journals.

During the event (tick one box):

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

|  | On behalf of Helm    | On behalf of Crew    |
|--|----------------------|----------------------|
| Name of Parent/Guardian                        | <input type="text"/> | <input type="text"/> |
| Home address                                   | <input type="text"/> | <input type="text"/> |
| Home phone No.                                 | <input type="text"/> | <input type="text"/> |
| Mobile No.                                     | <input type="text"/> | <input type="text"/> |
| Person acting in loco parentis (if applicable) | <input type="text"/> | <input type="text"/> |
| Mobile No.                                     | <input type="text"/> | <input type="text"/> |
| Signature of parent/guardian.                  | <input type="text"/> | <input type="text"/> |
| Date.  | <input type="text"/> | <input type="text"/> |

**This Form must be fully completed, signed and attached to the Event Entry Form.**