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| **PARTICIPANT DETAILS** |
| Name: |
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| Date of Birth & Age: |
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| Phone number (home): (mobile): |
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| Email address: |
|  |
|  Address: |
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| Swimming/Triathlon club (if any): |
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| **EMERGENCY CONTACT DETAILS** |
| Emergency contact: |
| Relationship: |
| Emergency contact no (home): (mobile): |
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| **MEDICAL AND SPECIFIC NEEDS** |
| Please give details of any medical or health conditions that might affect your participation in swimming/triathlon and what support/modifications are needed: |
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| Please list any medications you take on a regular basis: |
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| Please give details of any specific needs that the coach should be aware of and what support/modifications are needed: |
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| **OTHER PARTICIPANT INFORMATION** |
| Previous triathlon experience (please include any recent results inc. splits): |
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| What other sports do you participate in regularly and how often? |
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| Why are you attending the sessions? |
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| What do you want to achieve in the sessions |
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| What is your approximate swim time for 200m, 400m and 1500m?  |
| 200m: |
| 400m: |
| 1500m: |
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| In the long term, what do you want to achieve from swimming/triathlon? |
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| Have you already entered any 2016/17 events or have any specific events targeted? (give details) |
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| Please detail any other specific information that is relevant to your participation in swimming/triathlon activity sessions: |
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| **Swim training and participation risk identification and exclusion of liability Associated Risk**I am aware of the physically strenuous nature of swim/triathlon training and the risks involved both medically and physically.I confirm I am healthy and fit (physically and medically) enough to participate in swim/triathlon training. I accept that should any physical or medical condition arise which is likely to affect my training, I shall withdraw in accordance with these conditions and let SwimTech/TEA multisports know as soon as possible.Accordingly, I acknowledge and agree that SwimTech/TEA multisports shall bear no liability for personal injury or ill health or for loss of personal property which may arise during the course of training and is not obliged to refund fees in such circumstances.I agree to the use of images and video taken during training which I may be participating in, to be used or promoted for education or information purposes to help future swimmers/triathletes by SwimTech/TEA multisports. |

Signature of participant (or parent if under 18): (Parent please write your name here: )

Date: