Beth Stephens

Keynsham Lifesaving Club

compsec@klsc.co.uk

01275 544421 / 07931462304

# **Trip To Birmingham University Lifesaving Competition – 8th December 2018**

Dear Member,

On Saturday 8th December, Keynsham Lifesaving Club plan to enter a team in Birmingham University’s annual lifesaving competition and we’d like to invite you to take part! The friendly atmosphere of the Birmingham University competition makes this the perfect introduction to competitive lifesaving.

Mixed teams of four from local lifesaving clubs and UK Universities will be competing against each other in 5 different events (See [www.ilsf.org/lifesaving-sport/disciplines](http://www.ilsf.org/lifesaving-sport/disciplines)) for a summary of what each event involves):

A Land-based Emergency Incident A Water-based Emergency Incident

A 12m Rope-Throw Relay Race A 50m Swim & 50m Tow Relay

A 4x25m Manikin Carry

If you don’t fancy competing, the competition organisers are always looking for volunteers to act as casualties during the incidents – this is a great way to get involved and see what a competition is like!

The competition is being held in Birmingham University’s 25m Pool. Because this competition is in Birmingham, we have organised transport to get you there. We will be getting a minibus from Keynsham Leisure Centre at 9:30am so please arrive at **9:15am** promptly. We then arrive in Birmingham at 11:30am. The competition will start at 12:00am and will finish at 7:00pm! We will be driving the minibus back to Keynsham leisure Centre and arriving back there for about 10:30pm so please pick your child up promptly.

Competitors will need to bring their swimming costume, goggles, KLSC swim hat (available to buy for only £6 if you don’t have one), towel, plenty to drink, a packed lunch, a small amount of money and a book or card game to keep them occupied during isolation. Competitors should not wear any jewellery or bring any valuables with them. Parents are welcome to watch the competition from the poolside, but seating is extremely limited.

Since members of other clubs are likely to wish to photograph the competition, it is a condition of entry that the parents or guardians of all competitors who are under the age of 18 give their consent for their son/daughter to be photographed and/or filmed during the competition. Participants in the trip will be representing Keynsham Lifesaving club and will be expected to behave in an appropriate manner at all times.

If your child wishes to participate in this trip, please complete the attached permission slip and return it to **Beth Stephens** (either at training or the address above) by **25th Nov** with a cheque for £25 in an envelope clearly marked with your child’s name. Places will be allocated on a first-come, first-served basis and cheques should be made payable to Keynsham Lifesaving Club. Alternatively, if you prefer to pay online we are pleased to accept payment directly to our account. Please use the member’s name as the reference for the transaction so that we can keep track of who has paid:

HSBC Regents St, Keynsham Sort Code: 40-14-18 Account No. 31347012

Yours Sincerely,

Beth Stephens

Competition Secretary

**Consent Form**

**Birmingham University Lifesaving Competition – 8th Dec 2018**

This consent form must be completed by the parent or legal guardian of the participant. A separate consent form must be completed for each participant and returned by 25th Nov 2018. To ensure the safety and welfare of competitors, the information you provide will be shared with the competition organisers. Please complete the form **CLEARLY** in **BLOCK CAPITALS** using a **BLACK** pen.

**Competitor’s Details**

|  |  |
| --- | --- |
| Full Name: |  |
| Date Of Birth: |  | Age: |  | Sex: | Male / Female |

**Parent’s Details (For General Correspondence)**

|  |  |
| --- | --- |
| Name: |  |
| Home Address: |  |
| Landline Phone: |  | Mobile Phone: |  |
| Email: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I would like to compete: |  | I would like to body/help: |  | I would like to watch: |  |

**Emergency Details**

|  |  |  |
| --- | --- | --- |
| Emergency Contact 1 |  | Emergency Contact 2 |
| Full Name: |  |  | Full Name: |  |
| Relationship to Participant: |  |  | Relationship to Participant: |  |
| Landline Phone: |  |  | Landline Phone: |  |
| Mobile Phone: |  |  | Mobile Phone: |  |

|  |
| --- |
| Please give details of any medical conditions which may affect participation in this competition (e.g. asthma, epilepsy, diabetes, allergies, muscle injuries, etc.)? |
|  |

**Parental Consent (PARENT or GUARDIAN to complete)**

|  |
| --- |
| I have read all the information provided and agree to my child taking part in this event.I understand that it is my responsibility to send the child’s medication with them to the activity clearly labelled with the child’s name. The trip organiser will look after it whilst the child is competing.I understand that in the event of injury or illness all reasonable steps will be taken to contact the emergency contacts using the details supplied, and to deal with the injury/illness appropriately.I ………………………………………….. (Insert parent/guardian’s name) being parent/guardian of the above named child hereby give permission for the event organisers to give the immediate necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where, in the doctor’s medical opinion, it would be contrary to my son/daughter’s interest for any delay to be incurred by seeking my personal consent.I understand that while Keynsham Lifesaving Club will make every effort to ensure the safety of my child, they cannot be held responsible for any loss, damage or injury suffered by my child during, or as a result of the competition. I confirm that my child is in good health and I consider him/her fit to participate.I give my consent for ………………………………………….. (Insert participants name) to be photographed and videoed during the competition and for the resultant images to be used to produce posters and articles to promote lifesaving and to be included in a report on the internet (including the Keynsham Lifesaving Club and the Royal Lifesaving Society Websites and Facebook Groups). I confirm that I have legal responsibility for this child and am entitled to give this consent. I also confirm that there are no legal restrictions related to images of my child being taken or published.Signed: Print Name: Date:  (parent or guardian) |

**Child’s Consent (CHILD to complete)**

|  |
| --- |
| I give my consent to be photographed and videoed during the event and for the resultant images to be used to produce posters and articles to promote lifesaving and to be included in a report on the internet (including the Keynsham Lifesaving Club and the Royal Lifesaving Society Websites and Facebook Groups).Signed: Print Name: Date:  (participant) |

Please return the completed form to:

**Beth Stephens** atKeynsham Lifesaving Club or send them to 18 Harrington Road, Stockwood, Bristol, BS14 8LD by **25th Nov 2018**

**Remember to include a cheque for £25 per person made payable to Keynsham Lifesaving Club.**

Alternatively, if you prefer to pay online we are pleased to accept payment directly to our account. Please use the member’s name as the reference for the transaction so that we can keep track of who has paid:

Bank: HSBC Regents St, Keynsham

Sort Code: 40-14-18

Account No. 31347012