



COVE SAILING CLUB

PO Box 12, Cobh, Co. Cork
Email: info@covesailingclub.ie

Supplementary form

Please note that this supplementary form must be filled in and returned to CSC for all Cadet members and/or family members under the age of 21 who wish to use CSC facilities.

NAME

AGE

CAN YOU SWIM.....

ALLERGIES

MEDICAL CONDITIONS.....

Buoyancy Aid Weight Categories – please tick correct category:

30kg – 50kg

50kg – 75kg

75kg – 90kg

DOCTOR TEL NO

NEXT OF KIN

NEXT OF KIN CONTACT NO

NEXT OF KIN CONTACT NO 2.....

Would like your child to be included in Cove Sailing Club photograph's :

YES

NO

(If YES photo's may be used on the Cove Sailing Club website)

PARENT/GUARDIAN SIGNATURE DATE

PARENT/GAUARDIAN CONTACT NUMBER

PARENT/GAUARDIAN ADDRESS

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