## Rotary Wheatbelt Swim for Reading 2020 1pm to 5pm, Saturday 22 Feb 2020 **Please Return This Page**

Name of Swimmer			
Date of Birth			
Age			
Home Address			
Postcode			
Phone number			
Email			
Swimming Ability e.g. Nov			

Medical Conditions we should be aware of for your safety and to ensure equal access to the event:

Emergency medication required (this is your responsibility):

**Emergency Contact Name:** 

**Emergency Contact Phone No:** 

Relationship to you:

## Photo policy

Our club photographer will be taking photos and videos of this event for promotional purposes on social media, our website and other media outlets. Please advise registration officials if you do not wish for yourself or your child/children to be included in any media.

Rotary

## **Declaration**

- I am able to swim 50mts unaided Yes / No
- I / We have read, understood and agree to abide by the terms and conditions of the Rotary Wheatbelt Swim for Reading as stated above.

**Signed** (swimmer):

Signed Parent/Guardian (swimmers under 18yrs):

Name of Parent/Guardian (please print):

The use of personal details will comply with the data protection act and will only be used for this event. We will not pass any personal details on to third parties.