



## Parent/Guardian Consent Form

### CONDITIONS OF PARTICIPATION

"Kokokaha Sailing Experience" is conducted by Yachting New Zealand Incorporated and/or its employees, agents, and members ("YNZ"). We acknowledge that all participants in "Kokokaha Sailing Experience" must always wear an approved buoyancy aid while on or near the water. All participants must be able to swim. For the purposes of "Kokokaha Sailing Experience" YNZ generally considers that being able to swim 50 metres in light clothing while wearing a buoyancy aid is sufficient for participation. We agree to comply with (and ensure the student complies with) these requirements and any other rules applying to "Kokokaha Sailing Experience"!" advised by YNZ to the student or to one of us before or during participation in "Kokokaha Sailing Experience"

YNZ will take all reasonable steps to ensure safety and protection from, and to minimize risk from, weather and water effects such as sunburn but, due to the variables and inherent risks of outdoor on-water recreation, these may occasionally occur, despite YNZ's commitment to safety we acknowledge that participating in "Kokokaha Sailing Experience" has inherent risks and dangers which may be beyond YNZ's control (including injury or death caused by sailing equipment, other water users, or the effects of being exposed to weather and water such as sunburn, dehydration and hypothermia). We also also acknowledge that YNZ is not responsible for transport to and from the venue. We accept all risks flowing from the student's or our participation in "Kokokaha Sailing Experience" To the fullest extent allowed by law, we release YNZ and all persons directly or indirectly associated with "Kokokaha Sailing Experience" from all claims, demands and proceedings relating to our or the student's participation. We indemnify YNZ and such persons against liability for any injury, loss or damage relating to participation, excluding any liability for fines or penalties that may be imposed on YNZ or any person under the Health and Safety at Work Act 2015.

I agree to the use of the student's or our photograph(s) and other relevant information ("information") in any event publicity or YNZ promotion. I agree to YNZ holding, retaining, using, and disclosing the information for its general administration purposes and for marketing, statistical and promotional use by it or organisations with which YNZ has a relationship or is affiliated. I understand that we have a right to access and correct any such information.

Yes, I would like \_\_\_\_\_ (student's name) to participate in "Kokokaha Sailing Experience"

<b>Student's Full Name</b>		<b>Parent/Guardian Name</b>	
<b>Age</b>		<b>Signature</b>	
<b>School &amp; Class</b>		<b>Email Address</b>	
<b>Date</b>		<b>Emergency Contact Number</b>	

### Parent/Guardian Consent

I have read the Conditions of Participation and agree to comply  (Please Tick)

I would like to receive more information via email or phone from the host yacht club as to how the above student can take part in more sailing  Yes  No (please tick)