

EVENT TITLE:

VENUE:

DATE:

PARENTAL PERMISSION FORM

(Only for Competitors under 18)

I,

Being the parent / legal guardian of

approve his/her entry to this event and

will be present at the event myself

OR

I hereby give permission to
to sign for any medical or surgical treatment necessary for my child during the above
named event.

Permission is also granted for drug testing to be performed in accordance with World Sailing
Anti Doping Code. This form does not constitute therapeutic exemption of a prohibited
substance. Please contact your National Sailing Federation for obtaining such exemption
when necessary.

Contact details *at the event* for the responsible adult named above

***Please complete this form, print it out
and bring to the Registration Desk at the event venue***