IMPORTAINT: PLEASE READ AND SIGN BELOW.

- 1. I am aware of the need to seek appropriate medical advice if I have any concerns as to the state of my health. No medical practitioner has informed me of nor do I have any know-ledge of any medical condition, which would make it inadvisable for me to participate in Open Water Swimming/Masters Swimming events or any other associated activities. Accordingly, I hereby certify that I am physically fit and well to participate in any such training and events.
- 2. I am aware of and appreciate the inherent risks involved in such training and competition Including the possibilities of injury and accident. I undertake to always conduct myself in a responsible and professional manner.
- 3. I undertake at all times to use my best endeavors to train and compete in a safe and proper manner and not to do anything which would expose myself or fellow swimmers to unnecessary risk of injury.
- 4. I further undertake at all times to take all reasonable safety measures for the protection of myself and fellow swimmers and to inform the Referee of any concerns I may have as regards to safety.
- 5. I acknowledge that during Open Water Swimming/Masters Swimming events the Dover life guard club and/or its officials cannot be held responsible for any loss or damage to personal belongings and that I must take all reasonable steps against any such loss or damage.
- 6. I hereby agree to abide by and be governed by the rules of the Amateur Swimming Association and all other laws and regulations applicable including the ASA Safety-Laws and DLGC operational procedures.

I have read and understand the above provisions and agree to abide by them.

Signature of Competitor	Date:
Signature of Parent	Date:
(if under 16)	