

18 Nov 2011

### Lifesaving Sport Training Session – 3 Dec 2011

Interested in lifesaving competitions, but don't know where to start? Or maybe you're an experienced competitor who wants to improve your technique? Either way, the RLSS West Region lifesaving sport training session is for you!

Join David Fielding (world lifesaving championships silver medallist, and producer of the *Lifesaving Sport* DVD) as he takes you through the skills required for the following events (see [www.ilsf.org/lifesaving-sport/disciplines](http://www.ilsf.org/lifesaving-sport/disciplines) for a summary of what each event involves):

100m Manikin Carry With Fins  
Rescue Medley  
Super Lifesaver

50m Manikin Carry  
Line Throw  
Rescue Medley Relay

You don't need to be the world's best swimmer, but you should be able to comfortably swim 200m (8 lengths of a 25m pool) without a break. The training is open to all lifesavers aged 14+. During the training you will receive individual feedback to help you improve your technique. We're also hoping to use an underwater camera as a teaching aid to help you refine your skills.

The training is being held in Bath University's 50m Pool. Please park in the East car park unless "Lifesaving Training" signs direct you elsewhere on the day. We will be meeting in the Sports Centre Concourse at 2pm (see [www.bath.ac.uk/maps](http://www.bath.ac.uk/maps)) and the session will finish at 5:30pm.

You will need to bring your swimming costume, goggles, swim hat, towel and rubber fins/flippers (see [www.tinyurl.com/buying-fins](http://www.tinyurl.com/buying-fins) for advice on buying fins if you don't own any). You'll also need to bring a warm jumper to wear on poolside and water or a sports drink to sip whilst you swim to keep hydrated. You may want to bring a snack for after training, but please ensure that you eat lunch *before* you arrive. Finally, please do not wear any jewellery or bring any valuables with you.

If you'd like to take part in this training session, please complete the application form overleaf and return it to the address above, with a cheque for £12 made payable to *The Royal Lifesaving Society*. Places are limited and will be allocated on a first-come first-served basis.

If you have any questions, please don't hesitate to get in touch.

David Fielding  
Vice-Chairman  
RLSS Avon and North Wiltshire

**Application Form**  
**Lifesaving Sport Training Session – 3 Dec 2011 – Bath University**

A separate consent form must be completed for each participant. To ensure the safety and welfare of participants, the information you provide will be shared with the other instructors. Please complete the form **CLEARLY** in **BLOCK CAPITALS** using a **BLACK** pen.

**Participant Details**

Full Name:			
Date Of Birth:		Sex:	Male / Female
Home Address:			
Landline Phone:		Mobile Phone:	
E-mail:			
RLSS Number:			

**Emergency Contact Details**

Emergency Contact 1		Emergency Contact 2	
Full Name:		Full Name:	
Relationship to Participant:		Relationship to Participant:	
Landline Phone:		Landline Phone:	
Mobile Phone:		Mobile Phone:	

  

Doctor's Name:		Doctor's Phone:	
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**Participant's Medical Details**

Do you have any medical conditions which may affect participation in this training (e.g. asthma, epilepsy, diabetes, allergies, muscle injuries, etc.)?	Yes / No
Are you taking any medication?	Yes / No
Do you have any disabilities or other special needs which may affect participation in this training?	Yes / No
Do you have any special dietary requirements?	Yes / No

If you answered "yes" to any of the previous questions, please provide full details below...

**Parental Consent (required for participants aged under 18)**

I have read all the information provided and agree to my child taking part in the activities described.

I understand that it is the responsibility of the parent/guardian/carer to send the child's medication with them in the original container clearly labelled with the child's name. The leaders will look after it whilst the child is engaged in activities.

I understand that in the event of injury or illness all reasonable steps will be taken to contact the emergency contacts using the above details, and to deal with the injury/illness appropriately.

I ..... (Insert parent/guardian's name) being parent/guardian of the above named child hereby give permission for the youth leader to give the immediate necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where, in the doctor's medical opinion, it would be contrary to my son/daughter's interest for any delay to be incurred by seeking my personal consent.

I understand that while the adults in charge of the group will make every effort to ensure the safety of my child, they cannot be held responsible for any loss, damage or injury suffered by my child during, or as a result of the activity. I confirm that my child is in good health and I consider him/her fit to participate.

I give my consent for ..... (Insert participants name) to be photographed and videoed during the training and for the resultant images to be used as a training aid, to promote lifesaving, and to be included in a report on the RLSS West Region Website. I confirm that I have legal responsibility for this child and am entitled to give this consent. I also confirm that there are no legal restrictions related to images of my child being taken or published.

Signed:

Print Name:

Date:

(parent or guardian)

**Participant's Consent (required for all participants)**

I give my consent to be photographed and videoed during the training and for the resultant images to be used as a training aid, to promote lifesaving, and to be included in a report on the RLSS West Region Website.

Signed:

Print Name:

Date:

(participant)

Please return the completed form to: **David Fielding, 6 Beckington Road, Bristol, BS3 5EB.**

Please include a cheque for £12 made payable to **The Royal Lifesaving Society.**