

Henleaze Swimming Club
PO Box 140
Westbury-On-Trym
Bristol
BS10 6YD

www.henleazeswimmingclub.org

20 January 2012

Emergency Response Activity Supervisor Course

Henleaze Swimming Club, in conjunction with RLSS Avon & North Wiltshire, is pleased to offer the Emergency Response Activity Supervisor qualification. This 12 hour course will give you the practical lifesaving skills that you need to supervise, teach or coach programmed activity at open water sites. This is *not* a lifeguard qualification.

The course covers: accident prevention, water-based rescue skills, risk assessments, normal operating procedures and emergency action plans, adult and child CPR, spinal injury management and basic first-aid (including management of an unconscious casualty, choking, shock, drowning, bleeding, fractures, asthma, epilepsy, diabetes, heart attack, cold shock, hypothermia, bites and stings).

The total cost of the course is £60 per adult (£30 for under 18's and concessions) which includes membership of the RLSS, course materials, tuition and assessment fees. There are no prerequisites, but candidates must be at least 16 years old and able to comfortably swim 200m in open water.

The course is being held at Henleaze Swimming lake (see www.henleazeswimmingclub.org for directions) on 12 May, 16 Jun, 23 Jun, 30 Jun and 6 Jul 2012; with sessions in a local indoor swimming pool scheduled for 19 May and 26 May. Training will start promptly at 9am and finish at 11am.

You will need to bring a well-fitting full-length wetsuit, swimming costume, goggles, swim hat and towel. You'll also need to bring plenty of warm clothes to wear after training and water or a sports drink to sip whilst you swim to keep hydrated. You may want to bring a snack for after training. Finally, please do not wear any jewellery or bring any valuables with you.

If you'd like to take part in this course, please complete the application form overleaf and return it to the address above, with a cheque made payable to *HENLEAZE SWIMMING CLUB*. 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.

Alison Laity
Club Administrator
alison@henleazeswimmingclub.org

Application Form
Emergency Response Activity Supervisor Course – Henleaze Lake

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:			

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 reports on the RLSS West Region Website and Henleaze Swimming Club 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 reports on the RLSS West Region Website and Henleaze Swimming Club website

Signed: _____ Print Name: _____ Date: _____
(participant)

Please return the completed form to: .

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Please include a cheque for £60 (£30 under 18s and concessions) made payable to *HENLEAZE SWIMMING CLUB* .