

# TRIBAL MEMBERSHIP

## SWIMMERS / TRIATHLON / MULTISPORT



This membership is for the sole use of swimming / multisport and triathlon visitors only. If you intend to scuba dive at Vobster Quay, then please purchase a diving membership.

**NOTE: Any persons found to be scuba diving at Vobster Quay on a TRIBal membership will have their membership rights removed.**

### OFFICIAL USE ONLY

|      |  |
|------|--|
| SI   |  |
| Date |  |

## THE BENEFITS

- Valid for 12 months
- Discounted entry
- Regular newsletter
- **Upto 10% Discount** on Retail Purchases
- **10% Discount** on Hire Equipment
- **10% Discount** on Food & Drink
- **Discounts** on coaching, workshops & training



## YOUR DETAILS

Membership #

*For renewing members, please enter your current membership number*

Order #

*Order Reference # from Vobster online shop  
Purchase here - <http://tinyurl.com/hw7zy5r>*

\* First Name:

\* Last Name:

\* Address:

\* Postcode:

\* Telephone:

Mobile:

\* Email:

\* Emergency Contact:

\* Emergency Number:

Swimming Club:

\* *(Indicates required field)*

Tick box to **OPT OUT** of Vobster Quay mailing list

**I have read and understood the **terms & conditions** included with this form and would like to apply for membership**

Signature:

Date:

Complete & return to: **Vobster Quay, Upper Vobster, Radstock, Somerset BA3 5SD**

# CONDITIONS OF ENTRY

Please read the following information before filling in the form on the opposite side of this sheet. The completion and signing of this form confirms your acceptance of the rules detailed below...



## Registration & Admission

- All swimmers are encouraged to take up membership of an appropriate NGB - Triathlon England, for example - which provides individuals with suitable insurance cover.
- All swimmers must sign in and receive a swimmer ID Tag and wear this on their wrist throughout their visit both on the quayside and in the water.
- Road ways are to be kept clear at all times. You must park as directed in designated areas. The front and side of the Quayside must be kept clear for emergency vehicles only. Bikes must be parked as directed.
- First time swimmers must complete a Health questionnaire and swimmer competence declaration form and any relevant waiver forms prior to swimming. These are available as downloads from [www.tribaltriathlon.co.uk](http://www.tribaltriathlon.co.uk) and can be completed in advance of your arrival to speed up entry.
- Swim sessions will start and finish at the allocated times as displayed on the daily information display boards by the water entry/exit points.
- The minimum age of entry is 14yrs. Children under this age are not permitted at the water's edge and must be supervised by a responsible adult at all times.
- Anyone aged 14-16yrs old must have a competent adult swimming with them.
- TRiBal/Vobster staff reserve the right at any time to refuse entry into the water of any swimmer who is deemed unfit to take part and/or to remove a swimmer not following the code of conduct/safety directions.
- Under no circumstances will a swimmer be allowed to enter the water if they have consumed alcohol or non prescribed drugs or are showing signs that they may be under the influence of these.

## Prior to Water Entry

- All swimmers must swim in a minimum of pairs (swim buddy) or have a designated swim spotter on the quayside who can raise the alarm should you get into any difficulty.
- All swimmers must wear a brightly coloured swim cap to aid their location and identification by others when in the water.
- Wetsuits must be worn unless a non wetsuit waiver form has been signed by a member of the TRiBal Triathlon staff with appropriate evidence of cold water swimming experience. Wetsuits must fit correctly and be suitable for open water swimming.
- Swimmers must familiarize themselves with the designated swim course and skills area (please see quayside display boards and info on [www.tribaltriathlon.co.uk](http://www.tribaltriathlon.co.uk)). Please swim in a clockwise rotation on the marked 750m course.
- Enter and exit the water by the designated quayside points only. Do not dive in or enter the water at any other point due to underwater hazards.
- Water entry should be feet first and away from other swimmers. No bombing or other unsafe water entry.

- No swimming will be permitted in severe, adverse weather conditions (including low temps) and no water entry will be permitted during an electrical storm.
- Water quality is regularly monitored and no swimming will be permitted if this drops below recommended EEC levels for bathing.
- Cover all cuts and abrasions with waterproof dressings. Do not swim with deep cuts.
- Do not swim if you have had an infection in the previous 3 days. If you are unwell or develop flu like symptoms after swimming please inform your doctor that you have been open water swimming.

## In Water Safety

- Please swim in the designated swim areas/course only.
- Any safety advice or instruction from TRiBal/Vobster staff must be followed immediately at all times.
- Please avoid swimming over diver's bubbles, divers may make rapid ascents which could cause injury if you are above them.
- If you or your swim buddy get into any difficulty, please remain calm, roll onto your back so you can breath, raise your arm and call 'help, help, help' until you are attended to by the safety boat.

## EMERGENCY PROCEDURES

### TRiBal Triathlon / Vobster Quay

In the event of an incident/emergency please inform a member of staff immediately. Our staff are trained and there to assist you in such circumstances. ALL injuries/illness - no matter how minor you think they are must be reported to a member of staff. We are here to help!

In the unlikely event that all swimmers need to be evacuated from the water TRiBal / Vobster Quay staff will sound repeated blasts on an air horn. You should stop swimming, acknowledge the signal and either return immediately to the quayside or be picked up by the safety boat. Please remain by the swim exit point until staff have checked you out.

**Please note that you are responsible for the management of your own safety whilst you are onsite, based on the guidelines, code of conduct and T&C's set out. TRiBal Triathlon/Vobster staff are there to assist you and provide informed guidance, support safety cover.**

**TRiBal Triathlon offers high quality coaching - see [www.tribaltriathlon.co.uk](http://www.tribaltriathlon.co.uk) for further details. TRiBal/Vobster welcome external coaches and clubs - please contact TRiBal triathlon to discuss pre-requisites to coach at Vobster Quay.**



## PRE-ACTIVITY READINESS QUESTIONNAIRE & DECLARATION

Please complete in full the below Questionnaire and Declaration along with your completed membership form or on your first visit as a non-member.

|                   |                      |               |                      |
|-------------------|----------------------|---------------|----------------------|
| Full Name         | <input type="text"/> | Date of Birth | <input type="text"/> |
| Postal Address    | <input type="text"/> |               |                      |
|                   | <input type="text"/> | Postcode      | <input type="text"/> |
| Email             | <input type="text"/> | Telephone #   | <input type="text"/> |
| Emergency Contact | <input type="text"/> | ICE Tel #     | <input type="text"/> |

### Section #1 - General Health Declaration

|   |                              |                             |
|---|------------------------------|-----------------------------|
| Has your doctor ever said you have a heart condition (such as coronary heart disease, congenital heart disease, or vascular disease)  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Do you feel pain in your chest, shortness of breath or dizziness when you undertake physical activity?  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| In the past month have you had chest pain when you are not doing physical exercise?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Do you lose balance because of dizziness or do you ever lose consciousness?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Is your doctor currently prescribing drugs for a blood pressure or heart condition or do you take any medication that may affect you when taking part in physical exertion? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Are you pregnant?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Do you suffer from epilepsy?  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Do you suffer from diabetes mellitus and need to take insulin?  | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Have you suffered from a significant joint, muscle or bone injury or had a viral infection in the last three weeks?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Do you know of any other reason that may affect your ability to take part in physical activity?<br>If yes, please state what:   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

If you have answered 'No' to all questions in Section 1 you can be reasonably sure that you can safely engage in moderate to vigorous physical activity. If you have answered 'Yes' to one or more questions you should consult with your doctor before starting moderate/vigorous exercise.

If for any reason your personal fitness or health changes please inform TRIBal staff and complete a new Questionnaire / Declaration.

### Section #2 - Swimming specific declaration

|  |                              |                             |
|--|------------------------------|-----------------------------|
| Are you able to competently swim a minimum of 400m in a swimming pool without swimming aids and without stopping other than to turn at the wall? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Are you a confident swimmer in deep water?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Are you able to tread water for a minimum of 1 minute?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Have you ever taken part in Open Water Swimming Activities or events before?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |



## PRE-ACTIVITY READINESS QUESTIONNAIRE & DECLARATION

Please complete in full the below Questionnaire and Declaration along with your completed membership form or on your first visit as a non-member.

At TRiBal Triathlon we take your health and safety seriously. We wish to highlight that open water swimming can be a potentially hazardous physical activity and could, if not approached with due care and consideration, lead to the risk of injury, illness and even death in exceptional circumstances.

- I agree that TRiBal Triathlon are not responsible or liable for any injuries or damages resulting from my participation. I have read the lake rules, terms and conditions and agree to follow them.
- I agree to swim at my own risk and understand the dangers associated with Open Water Swimming with the potential for serious personal injury and property loss.
- I agree that I will swim in the designated swim areas and in a way that is safe and doesn't interfere with other swimmers. I will swim only during opening times stipulated and when the lake is deemed safe to swim by TRiBal Triathlon.
- I certify that I am physically fit, have no pre-existing medical conditions that would affect me swimming outdoors and have completed the health Questionnaire and Swim declaration. I will alert TRiBal Triathlon if my personal health and/or fitness status changes.

The answers provided above are accurate and truthful to the best of my knowledge and I do not believe there is any reason I should not take part in the physical activities involved.

|   |                      |                     |                      |
|---|----------------------|---------------------|----------------------|
| Signature   | <input type="text"/> | Date                | <input type="text"/> |
| <b>For persons under the age of 18yrs this form must be signed by a parent or legal guardian...</b> |                      |                     |                      |
| Parent / Guardian Name  | <input type="text"/> | Contact telephone # | <input type="text"/> |
| Signature   | <input type="text"/> | Date                | <input type="text"/> |

### For Official Use Only...

|                          |   |   |                      |
|--------------------------|---|---|----------------------|
| <input type="checkbox"/> | I have checked the Health Questionnaire and Swim Declaration and based on the information they have provided and my assessment                  |   |                      |
| <input type="checkbox"/> | I agree to the above named swimmer, swimming at Vobster Quay  | TRIBal Membership No. #<br><input type="text"/> |                      |
| <input type="checkbox"/> | I do not agree to the above named swimmer, without them providing suitable evidence that they are in good health and / or are competent to swim |   |                      |
| Name                     | <input type="text"/>  | Date  | <input type="text"/> |
| Signature                | <input type="text"/>  | Position  | <input type="text"/> |