



APPENDIX 7: APPTITUDE FORM

**FORM AUTHORIZING A PERSON (18 YEARS OLD AND OLDER) TO  
PARTICIPATE IN AN OPEN WATER SWIMMING COMPETITION  
(APTITUDE FORM)**

Please complete. This is necessary due to the inherent risks associated with Open Water swimming. Your answers will permit us to better help you in case of an emergency. Only the Organizing Committee will have access to the information provided below and will be destroyed after the competition.

Name of the competition: East Coast Championships 2024 - Open Water

Date of the competition: Wednesday, July 10, 2024

Your name:

Date of birth:

Club:

Name of coach:

Emergency contact:

Telephone number:

Other medical / health information that you feel is important for those that may need to administer First Aid (please do not write anything if you have no health problems)

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I consider myself to be of sound mind and health to register for this Open Water competition. I absolve the organizing committee and the Provincial Section of all responsibility to any personal harm which may occur as a result of this competition and accept the risks inherent with this type of competition.

Signature \_\_\_\_\_

Date \_\_\_\_\_