



# TE WAKA POUNAMU

OUTRIGGER CANOE CLUB • ŌTAUTAHI • AOTEAROA

## Rēhita / Member Registration and Risk Waiver form

Please read and complete a separate form for each individual paddler that this registration covers (eg. if you are filling in for tamariki). Both new and existing members should complete this form prior to the payment their membership fees to ensure contact details are current. Once completed, please hand to the session leader at club training or email to [tewakapounamu01@gmail.com](mailto:tewakapounamu01@gmail.com)

You can also complete and pay membership fees online at: [www.tewakapounamu.com](http://www.tewakapounamu.com)

Tēnā rawa atu koe / Thank you!

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|--|---|
| <b>Ingoa / Full Name:</b>  | <b>Tuakiri ā-ira / Gender:</b>  |
| <b>Wāhi Noho / Address:</b>  | <b>Numa Waea / Phone Number:</b>  |
| <b>Waea Pūkoro / Mobile Number:</b>  | <b>Īmēra / Email Address:</b>   |
| <b>Wā Whānau / Date of Birth:</b>  | <b>Whakapapa / Ethnicity:</b>   |
| <b>Tō mahi / Occupation:</b>   | <b>Whakapā Aitua / Emergency Contact:</b>   |
| <b>Tautōhito Waka/ Paddling experience:</b>  | <b>Tautōhito Kaukau / Swimming Ability:</b>   |
| <b>Āhua Hauora / Medical Conditions:</b> Please specify any conditions that the club management should be aware of in the event of an emergency or speak in confidence to an executive officer. E.g. Asthma - need to carry inhaler: | <b>Pārongo Anō / Other Information:</b> Please let us know any other information that may be relevant to your registration. Eg. If you hold a first aid certification, useful skills and experience... <ul style="list-style-type: none"><li>- First Aid Certification: (Y / N)</li><li>- Waka Repair Experience: (Y / N)</li><li>- Waka Towing Experience: (Y / N)</li></ul> |

I hereby certify that I am physically fit and of proper health to participate in outrigger canoe training, competition, and events. I acknowledge that the aforementioned activities are physically strenuous from neuromuscular, cardiovascular and aerobic perspectives and that sudden unexpected injury or death may occur from diagnosed or undiagnosed conditions I may have, and that the Club and its members tailor training sessions in such a way that high physiological demands are placed on paddlers of all levels. I further acknowledge that the aforementioned activities are inherently risky due to the nature of the medium where they are practiced (bodies of water, both sheltered and unsheltered) and of the equipment used. While the Club and its members have taken and take steps to diminish inherent risks, the demands of the sport require that training and competitive events be undertaken in conditions i.e. surf, waves, high winds, among others) regularly

I agree to wear a properly fitting PFD at all times paddling on Lyttelton Harbour and that I acknowledge and understand that I am fully responsible for any risks, harm to myself that I may encounter as a result of paddling with Te Waka Pounamu Outrigger Club.

Signature of Participant: \_\_\_\_\_

Date: \_\_\_\_\_