

# Westhorpe Wild Swimming Waiver Form 2022

Fields marked with an \* are required

Full Name\* \_\_\_\_\_

DOB\* \_\_\_\_\_

Address\* \_\_\_\_\_  
\_\_\_\_\_

Post Code\* \_\_\_\_\_

Contact Number\* \_\_\_\_\_

E-mail\* \_\_\_\_\_

## Emergency Contact Details

Emergency Contact Name\* \_\_\_\_\_

Emergency Contact Number\* \_\_\_\_\_

## Health Questionnaire

Please answer the following health related questions as honestly and accurately as possible for Westhorpe Wild Swimming to evaluate your readiness to take part in open water swimming. If you have any difficulty in answering any of the questions please do not hesitate to ask staff for assistance. Your responses will of course be kept in the strictest confidence:

Do you suffer from any medical conditions? \*

Yes / No (Please circle answer)

Do you take any form of medication? \*

Yes / No

Please list these here \_\_\_\_\_  
\_\_\_\_\_

Do you suffer from high or low blood pressure? \*

Yes / No

Do you have any known allergies? \*

Yes / No

Have you ever been advised by a doctor or specialist to avoid any type of exercise? \*

Yes / No

If you have answered yes to any of the questions above please provide full details below\*

---

---

---

Westhorpe Wild Swimming takes your health and safety whilst swimming seriously. We wish to highlight that open water swimming can be a potentially hazardous physical activity and any swimming can lead to risk of injury and even death in exceptional circumstances.

By reading and signing this agreement, I except that Westhorpe Wild Swimming are not responsible or liable for any injuries or damages resulting from my participation in any activities or my use of equipment or facilities offered by Westhorpe Wild Swimming.

I agree to follow all rules and advise from the, organisers and staff.

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 only swim in the areas stipulated by Westhorpe Wild Swimming.

I will swim only during the opening times stipulated and when the lake is deemed safe to swim by Westhorpe Wild Swimming.

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. I will alert Westhorpe Wild Swimming if my health changes at any time in the future.

I acknowledge the risks associated with swimming in open water.

I waive, release and discharge Westhorpe Wild Swimming and will not make any claim against them.

**By signing this agreement you waive all rights and agree to swim entirely at your own risk.**

I have read this document and understand its contents – I hereby confirm that I do not know of any reason as to why I should not undertake any activities offered by Westhorpe Wild Swimming

Signed \* \_\_\_\_\_

Name\* \_\_\_\_\_

Date\* \_\_\_\_\_

(Valid for 2022 Season Only)