*Open water is a fantastic experience but it does come with its risks. Please read and abide by the code of conduct below:*

* Minor cuts and abrasions must be covered up with a plaster. If you have any deep cuts you must not swim.
* Do not swim if you are unwell.
* Do not swim if you are taking medication which may affect your ability to swim safely.
* If you are unwell after open water swimming and suffering with flu-like symptoms or headaches please see your GP ASAP and inform them you have been swimming in open water.
* Try not to ingest any water while swimming in open water.
* Do not eat after open water swimming until you have washed your hands in fresh water.
* It is compulsory to wear brightly coloured swim hats so you can clearly been seen in the water, (NO HAT, NO SWIM).
* ***Wetsuits are compulsory at all times***; there is no exception to this rule.
* You must check in with the open water organiser on arrival and check out directly after exciting the water.
* Open water swimming with AM activ is not for beginners.
* If you are new to open water you must arrange to have an open water swim coaching session with AM activ before you can swim at AM activ open water swim venues.
* Hinchingbrooke country park open water swimming on Friday nights is for Members only, for membership enquiries please contact AM activ on info@amactiv.co.uk .
* Lake Ashmore open water swimming is open to AM activ members & non-members. Please see AM activ website for details of Lake Ashmore open water swimming. [www.amactiv.co.uk](http://www.amactiv.co.uk)
* Please swim in groups or pairs for you own safety.
* Please take note of the safety briefing that is carried out at the beginning of every session.
* You must leave a form of ID to the open water organisers at the point of signing in, ***NO ID means NO swim***, (acceptable ID: British triathlon membership card, England athletics membership card, Sports club membership card, Drivers Licence).
* Please be alert to the environment and other swimmers around you and make the organisers aware of any concerns you may have or if you see other swimmers in distress.
* It is your responsibility to check the organiser has your emergency contact details.
* Under 18s must swim with an adult at all times.

**Disclaimer**

1. I am aware of the need to seek appropriate medical advice if I have any concerns as to the state

of my health. I have not been informed by any medical practitioner and I do not have any knowledge of any medical condition which would make it inadvisable for me to participate in Open Water swimming. Accordingly I hereby certify that I am physically fit and well to participate in any such training.

2. I am aware of and appreciate the inherent risks involved in such training including the possibility

of injury and accident or death. I undertake to always conduct myself in a responsible and

Professional manner.

3. I undertake at all times to use my best endeavours to train in a safe and proper manner and not

to do anything which would expose myself or fellow swimmers to unnecessary risk or injury. I

further undertake at all times to take all reasonable safety measures for the protection of myself

and Fellow swimmers and to inform the non-swimmer watcher of any concerns I may have with

regard to safety.

4. I acknowledge that at open water swimming training the organisers cannot be held responsible for any loss or damage to personal belongings and that I must take all reasonable steps against any such loss and damage.

5. I acknowledge that I have read, understood and will comply with the Open Water Swim

Code of Conduct for AM activ and its partners.

6. I take full responsibility for my own action and absolve AM activ and its partners from any liability arising from injury or death from open water swimming.

7. I am at present capable of swimming a minimum of 750 metres nonstop.

8. I am over 18 years of age (persons under 18 must be accompanied by an adult at all times).

**Swimmers Details**

Name...................................................................................................................

Address................................................................................................................

**I have read, and will abide by the guidelines and I confirm acceptance of the disclaimer & code of conduct.**

Signature................................................................ Date.........................................

**EMERGENCY CONTACT DETAILS**

Name............................................Telephone...................................................

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Relationship to member..........................................................................................