

## Attention: Zone Secretary, Zone Registrar, Race Director & or Race Secretary

## Parental/Guardian Permission:

I						<u>Print Full Name</u>
of						Print Address
Hereby give permission for my c	hild					<u>Childs Name</u>
AOCRA ID	DOB	_/	_/	_ a membe	r of	000
who will be fourteen or over in the outrigger canoe events sanctioned I understand that the coach of the division events. I am aware that my child must turn	by AOCRA division n	A and t nust al	he Zo lso ag	ne Committe ree that my	e. child tak	es part in the open
Parent or Guardian Signature:						
Parent or Guardian Name:						
Qualified Outrigger Coach Appro	oval:					
I					<u>Prin</u>	t Full Name
of					<u>Prii</u>	nt Full Club Name
AOCRA ID:Level O	ne Outrigg	ler Coa	ach Ce	ertificate #		
give Permission for the person nor	ninated on	this fo	rm to t	ake part in o	pen divis	sion events at
	Ev	/ent on	I	_//	appr	oved by AOCRA Ltd
and the Zone Committee and certify	/ that the ju	inior no	ominat	ed on this for	rm has c	ompleted the annual
Senior Swim/Tread water test as pe	er the AOC	CRA Sa	afety a	nd Risk Man	nagemen	t Policies
Completed the Annual Swim/Tre	ad Water	Test fo	r Seni	ors		
Signature:						

AOCRA Junior Parental/Coach Approval Form F12 – V3 Updated 3 May 2018