



University of Worcester – Lakeside Campus

Activity Participation Agreement & Consent Form

1. Purpose of this Form

This Declaration Form must be completed by each adult participant before using the facility. The information you provide will be used to assess your suitability for self-led open water swimming and support compliance with safety and insurance requirements.

The University of Worcester (UoW) requires this information to ensure safe participation in activities at Lakeside Campus and to meet legal obligations. Your information will be used only for safety management, activity administration, programme evaluation and—if you opt in—future activity communication.

UoW is the Data Controller. Details of how we process your data, how long we retain it, and your rights can be found at: <https://www.worcester.ac.uk/informationassurance/visitor-privacy-notice.html>

Participant Consent

- I consent to my personal data being processed for the purposes described above.
- I would like to receive promotional information about activities at the Lakeside Campus.

Signature: _____

Date: _____

2. Participant Details

Full Name	
Address	
Postcode	
Telephone	
Email	
Communication Preferences	

3. Emergency Contact Details

Name	
Telephone	

4. Participant Competence & Health Declaration

- I am 18 years of age or older.
- I am a competent swimmer able to swim at least 600m unaided in open water.
- I do not have any illness, injury, disability or medical condition that may affect my ability to participate safely.
- I am not taking any medication that may impair my ability to undertake strenuous or cold-water activity.
- I have read, understood, and agree to follow all facility safety rules and staff instructions.
- I will swim within my own ability, follow marked swim routes, and adhere to all safety advice provided by venue staff and signage.

Relevant experience/qualifications: _____

5. Acknowledgement of Risk

Open water swimming involves exposure to cold water, submerged hazards, variable depths, currents, reduced visibility, water quality risks and limited exits. By signing this form, you acknowledge and agree that:

1. Open water swimming carries inherent risks of serious injury, illness or death.
2. The University does not provide personal accident insurance; participation is at your own risk.
3. You must comply with safety measures including wearing appropriate equipment.
4. You are responsible for assessing environmental conditions before entering the water.
5. You understand the danger of cold-water shock and hypothermia and will not enter the water if unwell.
6. You should not swim alone; a buddy or supervision is strongly advised.
7. You understand potential health risks including waterborne illness and will avoid swallowing water.
8. You will exit the water and alert staff if hazards arise or you feel distressed.

6. Liability Statement

Nothing in this document excludes or restricts UoW's liability for death or personal injury resulting from our proven negligence, nor does it affect your statutory rights under UK law.

Subject to the above, the University is not liable for loss of personal property or injuries/illness arising from inherent risks where reasonable safety steps were taken.

You accept full responsibility for your decision to participate and your actions while swimming.

7. Behaviour & Safety Compliance

UoW may stop or refuse participation if behaviour is unsafe, poses risk to others, or if important information is withheld.

8. Participant Declaration

I confirm that I have read and understood this Consent Form, including the Acknowledgement of Risk, and agree to comply fully with all requirements.

Signed: _____

Print Name: _____

Date: _____