



Visitor/Guest Trip Sign-on Sheet

Destination: _____

Date: _____ Grade: **1 2 3** (circle)

Trip Leader: _____

Trip Leader Grading: **1 2 FWG FWI SG SI** (circle)

Trip conducted in accordance with QSKC Trip Plan: _____ (sign)

Visitors have completed Declaration Form: **Yes No** (circle)

By signing this form you acknowledge:

1. You are medically fit to paddle on this trip.
2. You understand the Visitor Policy and have paid the necessary Insurance cost (\$10.00) and completed the necessary documentation.
3. Your kayak is seaworthy and complies with the club requirements for this trip.
4. You understand the risks associated with sea kayaking.
5. You are familiar with Club policies and paddling guidelines.

This paddle will follow the QSKC COVID Safe Plan and guidelines. If there are any concerns please contact the Club's COVID Safety Co-Ordinator at covid@qskc.asn.au

	Name and Email address	Contact Number	Skill Grade	Emergency Contact #	Medical Conditions	Signature
1	Name Email:					
2	Name: Email:					
3	Name: Email:					
4	Name: Email:					
5	Name: Email:					

