Medical Disclaimer and Acceptance of Risk

Participant Name:				Date of Birth:				
Address:				Gender:				
				Postcode:				
Doctors Name:	Doctor's Nu			nber:				
Emergency Contact:		Conta	Contact's Numl					
Relation to Participant:		Mobil	e Num	ber:				
			Yes	No	If yes, please give details.			
Do you have any medical conditions? (e.g. diabetes, epilepsy, etc.)								
Are you receiving any medical treatment?								
Do you suffer from allergies? (e.g. stings, food, penicillin, etc.)								
Have you had any physical injuries in the past 3 years? (e.g. sprains, dislocations, etc.)								
Are you water confident?								
Do you have any dietary needs? (e.g. vegan, celiac, etc.)								
Is there any additional information you feel may be relevant?								
I give Parkwood Outdoors permission to use photographs/videos of my child taking part in any activities on social media and any marketing								

Whilst we are dedicated to the safety of clients and endeavour to ensure all activities are operated to a high standard of safety, there is always an element of unforeseen risk. Anyone wishing to take part in an activity operated by Parkwood Outdoor Activities does so with this understanding. All activities offered can be physically demanding therefore, you should be in reasonably good health and physical fitness before participating. It is always advisable to seek medical advice if you are unsure about your health

Understanding and Acceptance of Risk

I agree to participate in the organised activities with the understanding that there is an element of unforeseen risk. I understand that all activities take place outdoors where conditions may be wet, slippery and dangerous. I agree to comply with the rules and regulations given by staff at all times. Should an instructor feel I am jeopardising the safety of others and/or myself, I will be excluded from participation for the remainder of the day and no refund will be given. I confirm that all the information provided above is true and correct and that I am fit and able to participate in the activities. I accept there is an element of risk in the activities I am undertaking and that Parkwood Outdoors will not be held liable for any loss or damages.

Signed (Parent/Guardian for Under 18s):	Date: