

To be completed and signed by the parents/legal guardians of all young people under 18 years old, and all adults participating in activities, or residing at The Birmingham Boys and Girls Union, t/a Woodlands Adventure and Outdoor Learning.

Woodlands Adventure and Outdoor Learning is collecting your or your child's data to enable you or your child to benefit from the outdoor learning at Woodlands Adventure and Outdoor Learning and in case of an emergency to protect vital interests of you or your child. Woodlands Adventure and Outdoor Learning will not share any of your or your child's personal data with any other external organisation unless required to by law.

For further details please view our privacy policy on the Woodlands Adventure website www.woodlandsadventure.co.uk

Participant Name		Group Name		
Date of Birth		Age		Male / Female
Address				
Postcode				
Emergency Contact Name		Emergency Contact Tel		

As the participant or parent/legal guardian where the participant is under the age of 18, you are responsible for advising us of any medical conditions, learning and behavioural needs that may affect activities, at least one week before the activity sessions commence. We will share this information with the instructor(s), and we will do our best to adapt the session(s) to meet the needs of the young person. Failure to provide this information will mean that we may be unable to accommodate all individual needs and participation in activities.

Does the Participant suffer from any illnesses/injuries/allergies/medical conditions* (please list)

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Is the Participant on any medication? (Please state medication and reasons)

.....

*Please supply any additional information on conditions which may require extra consideration by Woodlands Adventure and Outdoor Learning staff.

In order to provide the best possible experience for all of our customers we require that all participants (and parents/guardians where the participants are under the age of 18 years) have been made fully aware, and have knowledge of the activities and the risks involved in them, and that any special needs and medical issues have been disclosed to the Centre prior to your booking commencing. It is your responsibility as the participant (and parent/guardians where the participants are under the age of 18 years), to ensure that this has been provided to Woodlands Adventure and Outdoor Learning.

Participation Statement;

Woodlands Adventure and Outdoor Learning places safety as a top priority. Adventurous activities involve some risks for the people taking part, the Woodlands Adventure team aim to keep these risks as low as possible. The chances of serious injury are extremely low, but the chance of minor injuries (bruises, bumps and – less likely – minor fractures) are a possible result of taking part in adventurous activities. Woodlands Adventure and Outdoor Learning will minimise the actual dangers by:-

- Carrying out a careful assessment of all risks before commencing the activity
- Only using experienced Instructors with the appropriate qualifications for the activity
- Giving clear safety instructions to everyone participating
- Ensuring equipment and clothing is well-maintained and suitable for the activity and environment
- Ensuring activities are within the capabilities of the participants
- Asking participants to supply any medical conditions or information
- Ensuring good hygiene standards are kept to ensure the safety of all, we expect participants to co-operate by following instructions and answering questions honestly about any medical conditions or other information relating to health and safety.

By signing this form:

- I declare that the above information is correct and if any information changes I will notify Woodlands Adventure and Outdoor Learning.
- I confirm I have received and fully understand the details of the visit to Woodlands Adventure and Outdoor Learning which my child/ I will participate in. I agree that I/ my child will participate in the activities and acknowledge that there is an inherent risk in these activities. I accept that in certain circumstances (e.g. weather) the content of the programme may change.

Signed _____ Date _____

Name of Parent/ Legal Guardian or Participating Adult _____

