



# Medical and Consent Form

<b>Participant Details</b>			
Name:		Date of birth:	
Male <input type="checkbox"/> Female <input type="checkbox"/>	Mobile phone:	Landline:	
Address:			
Participant email: If participant is under 18, please also include a parent's/guardian's email. Parent's/guardian's email: We send out a monthly email to inform our members of club trips or activities. If you/the participant <b>do not</b> want these emails, please tick this box. <input type="checkbox"/> We <b>won't</b> pass your details on to anyone else. See website for full T&Cs.			
During the event there may be times when photographs or videos are taken. If you do not wish photographs or videos to be taken of you/the participant please tick here: <input type="checkbox"/>			

<b>Emergency Contact</b> (must be over 18)	
Name:	Relationship to participant:
Mobile phone:	Landline:

<b>Medical, Dietary and Cultural Needs</b>	
Doctor/Surgery:	Phone:
Address:	
Details of any allergies or medications currently being taken:	Details of any infectious diseases the participant has been in contact with in the last three weeks:
Details of any disabilities or dietary, medical, cultural or additional needs that might affect this activity: If you/the participant need to discuss this with the Event Leader please do this <b>in advance</b> of the event otherwise you/the participant may not be able to participate.	

<b>Statement</b>	
<ol style="list-style-type: none"> <li>1. I have ensured that I/the participant understand(s) the nature and risks of the activity and for his/her/my safety and for the safety of the group that any rules and instructions given by leaders are followed.</li> <li>2. I undertake to inform the leader of the activity of any changes in the fitness or health of the participant/myself prior to the activity.</li> <li>3. I am in agreement that those in charge may give permission for the participant (detailed above) to receive medical treatment in an emergency.</li> </ol> <p>A parent or guardian must complete and sign this form if the participant is under 18 years of age.</p>	
Signed (participant/parent or guardian):	Date:

Please return this form to Adventure Dolphin or scan and email it to the Event Leader.