

CONFIDENTIAL - UNDER 18's INFORMATION

Participants Details	Other Relevant Information
Name:	Can we send you details of Real Adventure activities and courses in
Address:	the future?
	Yes No
	Real Adventure uses photographs of actual participants taking part in
Date of Birth:	activities within promotional literature and on the website. I consent
[]	to such photographs being taken in all reasonable activity related
Doctors Name:	situations.
Doctors Tel. : Doctors Address:	I concept to any emergency medical treatment that may be necessarily
Doctors Address.	I consent to any emergency medical treatment that may be necessary whilst under the supervision of Real Adventure.
	whilst under the supervision of hear Adventure.
	l accept that Real Adventure and its representatives are not under
	any liability whatsoever in the respect of loss or damage of personal
Parent/Guardian Details	property, however caused.
Name:	
Address:	Participation Statement
	I undertake to inform Real Adventure as soon as possible of any
Emergency	changes in the medical circumstances between the date signed and
Contact Number	the commencement of the activity.
	One of the attractions of outdoor activities is its adventurous nature.
	The accident rates are thankfully low but from time to time serious
Medical Information	and fatal accidents do occur.
Does your son/daughter suffer from any conditions of which the	
instructors or leaders should be aware?	It is important that participants are aware of, and accept, the ele-
Yes No	ments of risk and the need to take responsibility for their own actions
If Yes please give details, including any medication.	
	I DECLARE THAT I AM MEDICALLY FIT TO UNDERTAKE ADVENTUROUS
	ACTIVITIES AND UNDERSTAND AND ACCEPT THE NORMAL RISK OF
	BEING IN AN OUTDOOR ENVIRONMENT.
Is your son/daughter allergic to any medication?	Denticipante Cimentum
Yes No	Participants Signature
If Yes please specify.	
	Parent or Guardian Signature
	Date
Has your son/daughter had a tetanus injection in the last 10 years?	
Yes No	
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e: dan@real-adventure.co.uk	
m: +44 (0) 7816 870 756	
t: +44 (0) 1539 723 669	
Jan China Ch	Public Liability Insurance is covered. Personal Accident Cover is available at an
	extra charge by request.
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