

Child Consent / Medical Form (U16's)



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| Child's Name: | Activity Date: |
| Address: | Activity: |
| | Group Organiser: |
| Postcode: | Organiser Tel: |
| D.O.B: | Gender: |

Emergency Contact Details

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| Name: | Emergency Contact No's: |
| Relationship to child: | |

Does your child have any medical conditions and/or are they receiving any treatment or medication that we should be made aware of? This should include asthma, allergies, injuries etc. If yes, please provide details:

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| Does your child have any special dietary needs (if applicable)? | Yes / No | |
| Can your child swim? (if no, please state if water confident) | Yes / No | |
| Please provide child's height & weight for equipment purposes: | H: | W: |

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| Do you consent to Black Mountain Activities Ltd taking photographs and video as means of promoting the business through displays, presentations, social media sites and website? | Yes / No |
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Covid-19 Acknowledgement -

Whilst restrictions have greatly eased, please help us continue to keep our staff & customers safe and our doors open. Should your child be testing positive for COVID-19 on the date of their activity, we kindly ask that they **DO NOT** attend or take part in activity. For up-to-date Welsh Government Guidelines, [please visit www.gov.wales](http://www.gov.wales)

Understanding & Acceptance of Risk

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

Declaration

- I confirm that the above details given are true and correct and that my child is fit and able to participate in the activities.
- I understand & agree that my child will not attend any activity if testing positive for Covid-19 on the date of their activity.
- I understand that all activities take place in the outdoors where conditions may be wet, slippery, and hazardous. I accept that there is an element in unforeseen risk and give consent for my child to take part in the organised activities.
- I agree and will ensure that my child understands, as reasonably possible, that it is important for their safety and that of their peers, that any rules & regulations given by the staff are always adhered to. I understand & agree that should an instructor feel my child is jeopardizing the safety of themselves, and/or others, they will be excluded from the activity without refund.
- I consent to any emergency medical treatment necessary to be given to my child by on-site first aiders or qualified medical respondents in the event of an accident.

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| Signature: | Relationship to Child: |
| Print: | Date: |

DATA PROTECTION We treat security with the highest priority. We hold data about you to run our business efficiently and is not kept longer than is necessary. It is kept safe and securely and handled sensitively to peoples data protection rights. You have the right to ask to see what data we hold for you, to ask us to correct it and also to ask us to remove it from our database. We do not share your data with any third party.