**THREE PEAKS OUTDOOR PURSUITS ACTIVITY DAY**

Date – 29/7/2022 (Please bring all signed forms with you on the day.)

The activity your Child is about to participate in is adventurous and therefore has associated risk. Following the safety rules and the information from the instructor advice will reduce that risk. Failing to follow these rules and advice could result in serious injury. Some activities will have age restrictions. Please be aware that the challenging physical nature of the activity may occasionally result in contact with equipment or harnesses, which might give rise to bruises or other bumps or scrapes. Helmets are required on most activities. If required they must be worn. Tie long hair back. Please dress appropriately for all weather conditions. Suitable clothing must be worn. (i.e. no skirts). Wear clothes you don’t mind getting dirty or even slightly damaged. Wear sensible sports shoes. Open toed shoes; croc type shoes, espadrilles or open back shoes must not be worn long sleeves and trousers will be required for motorsport activities. Bring all medication you may need throughout the activity.

I am willing to permit my child to participate in the activities listed below:

1 – QUADS

2 – AEROBALL

3 – ARCHERY

4 – CRATE STACK

Parents Signature ………………………………………………………………………………………………………………….

Parents Name in Capitals ……………………………………………………………………………………………………..

Child’s Personal Details

Full Name ……………………………………………………………………………………………………………………………..

Date of Birth …………………………………………………………………………………………………………………………

Address …………………………………………………………………………………………………………………………………

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POST CODE…………………………………… CONTACT TEL NO. ……………………………………………………….

E-MAIL …………………………………………………………………………………………………………………………………

MEDICAL

I CONFIRM THAT I AM GIVING CONSENT FOR EMERGENCY MEDICAL TREATMENT TO BE ADMINISTERED IN THE UNLIKELY EVENT OF AN INCIDENT TAKING PLACE.

IF YOUR CHILD SUFFERS WITH ANY MEDICAL COMPLAINT PLEASE INSERT THE RELEVANT DETAILS BELOW.

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