



Date

Group leader/individual..... Contact Number.....

Address..... Postcode.....

PART 1 – ACKNOWLEDGEMENT OF RISK FORM

1. I declare that to the best of my knowledge I do not have a medical condition which might increase the chance of being involved in an incident, resulting in injury to myself or others, e.g. heart condition, epilepsy etc. I further declare that, to the best of my knowledge, I am not pregnant.
2. I understand that adventurous activities may be physically and emotionally challenging. I accept that there are some inherent risks associated with such activities.

Print Name	Signature	Email ✉
1.		
2.		
3.		
4.		
5.		

We will occasionally contact you with special offers and latest news – Tick this box if you do not wish to receive occasional email offers from Rock and Ice

PART 2 - CONSENT FORM FOR UNDER 18s

1. I (print name) consent to allow the child(ren) listed below to participate in the activities
2. I declare that if I am not the parent or guardian of the child(ren), I have authority from the child(ren)'s parent or guardian to sign this consent form.

Participating child(ren)'s name	Age	Participating child(ren)'s name	Age
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

Consenting adult name	Consenting adult signature	Date

Rock and Ice



Office use: