

ACKNOWLEDGEMENT OF RISK

The following must be read and signed by each person participating in activities provided by north wales active Ltd. Any person under 18 must have their form signed by a parent or guardian, then returned to north wales active prior to the activity.

Iam aware that there are risks involved in adventure activities and will declare any injuries or medication to north wales active that could hinder me whilst on this activity.

Injury/Medication.....

If you depend on or require Medication, you have the responsibility to have it with you on all activities with North Wales Active.

By signing this form I acknowledge that

- Physical exertion
- Injury
- Loss or damage to personal equipment/clothing

Could happen and therefor act responsibly and obey all instructions by north wales active staff.

I confirm I have read and understood this agreement by signing the form below.

Print full name.....D.O.B.....

Address.....

.....Tel.....

Activity participating in.....

Next of kin details / name and phone no

Signature of parent/guardian.....Date.....

Signature.....Date.....

