

Group Register

Reference Number: _____

Activity – (Please Circle): **Skiing / Tubing**

Date: ____/____/____ Time: ____:____

As the Lead Booker, I am responsible for the group and will remain on site for the duration of the session:

Lead Booker's Full Name and Signature: _____

Group Name (School or Scout Group Name): _____

THIS IS A LEGAL DOCUMENT - PLEASE READ CAREFULLY.

ALL ACTIVITIES

I guarantee that I/my dependent am/are fit for this sporting activity and **do not suffer from back problems, a weak heart, or any other medical conditions that might be affected by this activity.**

I/my dependent is/are not under the influence of alcohol or drugs.

Please be aware that if you/your dependent are overweight or unfit, the chances of injury are increased.

If you are on your own, please leave emergency contact details with staff.

Once the lesson has started, no one else will be able to join in.

Gloves must be worn at all times.

SKIING ONLY

HELMETS MUST BE WORN BY EVERYONE TAKING PART IN SKIING ACTIVITIES.

I/my dependent am/are aware that I am participating in an extreme sport and knowingly accept the risks involved. I/my dependent am/is aware that there is a chance of falling and consequently a **risk of bodily injury or death.**

SIGNATURES

Please write the **full name of every participant** on the Group Register on the next page.

If an Individual Consent Form has already been completed for the participant, **no signature is required against their name on this form.**

If an Individual Consent Form has not been completed:

Participants aged 17+ may sign for themselves.

Participants aged 16 and under require a parent/guardian signature.

By signing, you confirm that you have read, understood and accepted the conditions above.

	Participant First Name	Participant Surname	Guardians First Name	Guardians Surname	Signature
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