



# Rock and River Outdoor Pursuits

Cliffs Farm, Wood Lane, Mawdesley, L40 2RL. 01704 822 644  
[www.rockandriver.co.uk](http://www.rockandriver.co.uk) [bookings@rockandriver.co.uk](mailto:bookings@rockandriver.co.uk)



## Confidential Medical Form

Please print in capital letters and return both forms on your activity day.  
A parent or guardian must sign for participants under eighteen years of age.

Participant Name.....

Date of Birth.....

Group / School Name.....

Date of Activities.....

Address.....  
.....  
.....

Email Address.....

We'd like to send you the occasional email about special offers and events at Rock & River. We'll only send things we hope you'll find interesting, but if you change your mind it's one simple step to unsubscribe. We won't share your details with anyone else.

Please tick here if you'd prefer not to be contacted

### Contact Number

Home.....Work.....Mobile.....

### Next of Kin –

Name.....

Relation to participant.....

Next of Kin Contact Phone Number(s).....

### Medical Information

Please list any medical problems / allergies the participant has (continue on a separate sheet if necessary)

.....  
.....  
.....  
.....

Please list any medication the participant has (e.g. Inhalers etc)

.....  
.....  
.....  
.....

Is the participant water confident Yes / No

Rock & River occasionally uses photography for publicity. We would like your permission to photograph/film you/your relative for possible inclusion on our website or other publicity material. The image(s) will remain the property of Rock & River and will be used only for the designated purpose of promoting Rock & River. You/your relative's details will remain strictly confidential.

If you wish to opt out, please tick here



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## Acceptance of Risk

**Important: Please read the following document before signing:**

I ..... (print participant name) wish to participate in an activity day at Rock and River Outdoor Pursuits on the .....(date).

If **under eighteen** this form must be read and signed by a parent or guardian of the participating young person on their behalf. It is the responsibility of the parent/guardian to ensure that the young person is aware of the risks involved in participating in adventurous activities, and that they understand the importance of the following terms.

- 1) I understand and fully accept that participating in outdoor activities entails some risk, and that while risks are minimised, accidents and injury may occur.
- 2) I will ensure that I am fully prepared for my activity day, bringing appropriate clothing and footwear for the activities I am participating in and the weather conditions, plus a full change of clothes and any medication I may need.
- 3) Whilst on Rock and River's premises, or under Rock and River's instruction, I will listen carefully to and abide by all oral instructions and rules given to me by Rock and River Staff Members. I understand that failure to do so may result in an accident.
- 4) I agree to wear all safety equipment provided by Rock and River in the manner demonstrated by Rock and River Staff.
- 5) I understand that certain elements of participation in outdoor activities will involve physically challenging activities.
- 6) I acknowledge that I am responsible for my own behaviour whilst on Rock and River's premise or under Rock and River's instruction. Offensive, aggressive or disruptive behaviour will result in the participant leaving the session, or premises.
- 7) I acknowledge that I am also responsible for my own possessions whilst at Rock and River. We advise that valuable possessions are left at home.
- 8) In the unlikely event of an accident, or loss or damage to my personal effects, I acknowledge that Rock and River will not be liable for any direct or indirect loss, damage or injury arising from or in connection with the activities (except for death or personal injury caused by Rock and River's negligence) and I waive all and any claims against Rock and River in this respect.
- 9) To the best of my knowledge I have declared all medical conditions (including pregnancy) which may make it more likely that I be involved in an incident which could result in injury to myself or others.
- 10) In addition, for parents and guardians signing on behalf of an under eighteen year old participant, I also accept that the group leader/organiser is directly responsible for my child between activity sessions, and that they are not supervised by Rock and River staff outside of activity sessions.

I have carefully read and understood the above and in signing below I agree to these terms.

Signed..... (Parent / guardian must sign for under eighteen year old participants)

Print Name..... Date.....