



Informed consent and risk acknowledgement

Name: (please print clearly)

Please tick boxes below to confirm:

I am 16 years old or older and wish to participate in activities provided by Sky Reach. ☐

Any children under 16 will supervised by an adult (18 years +). A maximum 2 children with any 1 adult). All children in my care have parental permission for Sky Reach activities. ☐

Neither I, nor the children in my care, are under the adverse influence of alcohol or drugs. ☐

Neither I, nor the children in my care, have any conditions that may make it dangerous to undertake adventurous activities, including pregnancy, medical or mental health issues. ☐

Neither I, nor the children in my care, have been advised by medical experts to avoid adventurous activities. (Please see Sky Reach staff for further information/advice). ☐

I understand that Sky Reach activities can be physically hard and strenuous, and there will be a risk of minor injury eg pinches, grazes and bruises. ☐

In order to minimise risks I, and the children in my care, agree to follow all instructions (written and spoken) and safety signs provided by Sky Reach. I will supervise the children in my care at all times. ☐

In the event of accident, or loss or damage to personal property, I acknowledge that Sky Reach will not be liable (except death or injury caused by Sky Reach's negligence). ☐

Name of child 1: Age:

Name of child 2: Age:

I acknowledge that I and the child/ren in my care (if applicable) have received, read and understood the Sky Reach Safety Rules, copy with this document.

Signature: Date:

Would you like to receive email updates and offers about Sky Reach? Yes ☐ No ☐

If **yes**, please confirm your email address:

Privacy notice: Any personal information collected by Telford & Wrekin Council will not be shared with any external organisations. For further details on the Council's privacy notice please view the privacy page on the Council's website: http://www.telford.gov.uk/info/20236/open_council/1041/telford_and_wrekin_council_privacy_notice

Safety notice: In the interests of safety, Telford & Wrekin Council reserve the right to refuse admission.

Office use only:

No. of participants:	Checked by (instructor):	Signature:	Date:	Session time:	Session type:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>