



Please complete the following form using block capitals and return it to a Sam Sykes Ltd member of staff or your link teacher. This personal information and consent form will be kept securely on file and represents your permission for us to work with the below named individual for the foreseeable future.
Please return the completed form within 7 days of receipt.



Personal information & Consent form

School/Unit Name:

Participant's expedition dates:

From	To	Year

Participant Personal Details

First names:

Family name:

Date of birth:

Age:

Male

☐

Female

☐

Other

☐

Address:

Postcode:

Mobile number:

Home number:

Next of Kin Details

Name of next of kin and relationship to you:

Next of kin contact numbers:

Next of kin address:

Postcode

Medical Information

The information provided in this section will be treated as confidential and will help ensure that you get the most out of the programme. If you have any doubt what so ever about completing this part of the form, please consult your doctor.

Does the participant have any of the following conditions?

	Yes	No		Yes	No
Back problems			High blood pressure		
Knee or ankle problems			Heart conditions		
Asthma			Diabetes		
Prone to Fainting			Physical Disabilities		
Prone to dizzy spells			Mental Illness		
Epilepsy			Infectious Disease		
Allergies			Other *Please specify		
Coeliac Disease			Have you had a Tetanus vaccination in the last 10 years?		

If you have answered yes to any of the above, please provide more information:

Please provide any information regarding any medication or medical treatment that you may or will need to take during the activity:

Please give details of any other recent medical conditions, medical issues or disabilities that Sam Sykes Ltd should be aware of:

Do you have any specific dietary needs (Vegetarian, Vegan, Nut Allergies):

Family Doctor Information

Doctor's name: Doctor's contact number:
Doctor's address:
..... Postcode:

Emergency Contact

Name: Contact number:
Address:
..... Postcode
How do you know this person?:

Consent to be completed by the parent / guardian / other responsible adult

In signing for a participant who is under 18 years of age, I acknowledge the following;

I have read the supporting information and confirm it is correct and agree to (insert name of participant)

..... taking part in the Sam Sykes Ltd expedition programme.

- I agree to the above named participant receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.
- I understand that the Sam Sykes Ltd staff will be acting in loco parentis during the programme and that during activities this will be delegated to the instructor or programme director of that activity.
- I agree to the organisers of the programme making contact by letter/ phone/email with further details of the programme and for monitoring/future offers of further development opportunities.
- I understand that any costs for damage caused by the above named participant will normally be passed onto their parent/guardian.
- I understand that if the above named participant is sent home it is my responsibility to collect them and/or make suitable arrangements at my own cost.
- I consent to photos and video footage of the above named participant being taken during the programme. I give permission for images and video to be used by Sam Sykes Ltd in any publications, including their website. Any images recorded can be copied and given to participants as a memento of their contribution.



Statement of Risk

The Sam Sykes Ltd team places safety as a top priority. Adventurous activities involve some risks for the people taking part, and we aim to keep these risks as low as possible. The chances of serious injury are extremely low, but the chance of minor injuries (bruises, bumps and - less likely - minor fractures) are a possible result of taking part in Adventurous activities. The Sam Sykes Ltd team will minimise the actual dangers by:

- Carrying out a careful assessment of all risks before commencing the activity.
- Only using experienced instructors with the appropriate qualifications for the activity.
- Ensuring equipment and clothing is well-maintained and suitable for the activity and environment.
- Ensuring activities are within the capabilities of the participants.
- Giving clear safety instructions to everyone participating.
- Asking participants to supply any medical conditions or information.
- Ensuring good hygiene standards are kept.

We expect participants to co-operate with the Sam Sykes Ltd team to ensure the safety of all participants, by following instructions and answering questions honestly about any medical conditions or other information relating to health and safety.

Protective Equipment

For some outdoor activities you may need to wear personal protective equipment such as climbing helmet, full body harness or life jacket. Please state below any reason why you may not be able to wear such equipment. If you are unsure about this question please discuss it with Sam Sykes Ltd staff.

I confirm I have read and understood the above and I, or the person named below, will be available during the dates shown if you need to contact me/us.

Parent/Guardian Name (Capital letters please):

Signature: Date:

Contact name:

Address:

Telephone number (if different from above):

Please ensure this form is signed above. Return to: Sam Sykes Ltd, Mintsfeet Road, Mintsfeet Industrial Estate, Kendal, LA9 6LU