

## Participant Registration Form/Parental Consent - Under 18's

Participants Name:	
Address:	
Tel No:	Mobile:
Parent/Guardians Name:	
Address (if different from above):	
Tel No:	Mobile:
Emergency Contact Name:	
Address (if different from above):  Tel No:  Mobile:	
Does the participant have any medical or behavioural conditions, which may affect or be affected by their participation in Adventure activities? Yes/No	
If yes, please provide details:	
In consideration of and through the participants' involvement in a Life Adventure, I hereby acknowledge and agree to release Life and/or its representatives from any and all liabilities in respect of personal injury, loss or damage unless such injury, loss or damage is the result of negligence on the part of Life and/or its representatives.  I agree to abide by such regulations as Life or its representatives may consider advisable in order to ensure the safety of	
participants.	representatives may consider advisable in order to ensure the safety of
SIGNED: (Parent/Guardian only)	DATE:

All information received is treated in confidence and remains the property of Life Adventure.

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