



Parental / Guardian Medical and Consent Form

BMX & off-road cycling is an exciting, challenging outdoor adventure. It's great fun, great exercise and easy to join in. Your child will learn a lot, and have a lot of fun. They may get muddy or damaged clothes, they may get wet, there is a chance they may fall off. We do everything we can to minimise the risks involved, and keep it fun and safe for them. We need you to know this & say you are happy for your child to take part. Please help us by filling in the information below, so we can give the children as safe and fun a day as we can.

Participant details:

Name: _____

Address: _____

Postcode: _____ Age during course: _____ Email: _____

Next of Kin details:

Name: _____

Address: _____

(if different to above)

Postcode: _____ Next of Kin contact tel: _____

Participant's medical conditions: (to be completed by parent / guardian)

Do you suffer from:

Epilepsy, Convulsions or Petit Mal:	Yes	No
Diabetes Mellitus (sugar diabetes):	Yes	No
Asthma:	Yes	No
Heart disease:	Yes	No
Have you had a serious illness (e.g. Bronchitis, Chest Infection, Influenza, Discharging Ear, Urinary Infection, etc.) in the last two months?	Yes	No
Are you recovering from an accident or broken limb?	Yes	No
Are you on any medication?	Yes	No
Is there any further information that the course staff should know?	Yes	No

Please provide detail to any questions ticked Yes over the page...

Parental / Guardian Consent:

- By signing, I understand what my child will be taking part in and give my permission for them to do it.
- I have given any medical conditions on the form above.
- I agree they can have any emergency first aid provided with best intention by qualified staff.
- I understand the staff will try to contact me as soon as possibly if treatment is given.

Signed: _____ Date: _____

Photo Consent:

- By signing I give permission for photos of my child to be taken and used in promotional materials by ReCycle Bikes.

Signed: _____ Date: _____