

Trek Information and Consent Form
To be completed legibly in ink, delete (*) items as appropriate

THIS PART TO BE RETAINED BY *PARENT/GUARDIAN

*Please return lower section of this form completed and signed, to the Trek Committee
On 1st October 2018*

Activity: THE TREK ACTIVITY HIKE
On: 6th October 2019
At: Inkberrow
Start Time: 8.30 am
Finish Time: 6.00 pm (Approx)

ADDITIONAL INFORMATION (For use on day of Trek Only)
Base Contact: Alan Brinkworth
Telephone: Mobile 07748 717365 / Mobile 07743 322423
PLEASE NOTE: Any Emergency situation will be dealt with by Trek Marshals who will be on constant patrol.



PARENT / GUARDIAN CONSENT

This section should be returned to the leader on or before the 1st October 2019

I have noted the arrangements and
I give permission for:

_____ to take part in: The Trek

Please state if your child has a
Disability or condition which might
Be affected by this activity_____

Please indicate details of any
Medical treatment she/he is
Having at the moment_____

I can be contacted during the day at

Tel No _____

Signed: _____

Name: _____

* Parent / Guardian

Date: _____

I give *consent/refuse consent for photographs of my son/daughter to be taken during the TREK

No One Will Not Be Allowed To Walk without this completed Consent Form

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