

Walk of Life – Parental Consent Form
Saturday 26th May 2012
Permission to participate in the Walk of Life 2012

The full 21 mile walk is restricted to walkers age 15 and over. All walkers between the ages of 15 and 17 must be accompanied by a responsible adult and their parent/guardian will need to complete this parental consent form before they will be allowed on the walk.

Children between the ages of 11 and 14 are normally allowed to participate in either the morning or the afternoon section of the walk, provided they are supervised at all times by a responsible adult. Their parent/guardian must sign the parental consent form before they will be allowed on the walk. Children between the ages of 11-14 wishing to participate in the whole walk must provide walk organisers with appropriate evidence of their fitness ability at least two weeks before the event. They must gain written consent from their parents and the walk organisers.

1. I agree for my son/daughter (named below) to take part in the 2012 Walk of Life.
2. I undertake not to hold The Forever Friends Appeal responsible for compensation in respect of loss or damage to personal property, which he/she sustains during the activities.
3. I understand the importance of advising The Forever Friends Appeal of any medical or special needs which may require particular attention in order to enable my son/daughter's full and safe participation in the event.
4. I understand not to permit my son/daughter to attend the walk if they are not in good health on the day of the walk and I will inform the walk organisers of their inability to attend.
5. If at any point of the walk, he/she requires urgent medical treatment and provided that I cannot be contacted personally, I give my permission to the medical authorities to administer such emergency treatment, including anaesthetic, as they consider necessary in the circumstances.

Details of walk participant: Please complete all parts of this form in block capitals

Surname Forename.....

Date of birth.....Age on 26th May 2012.....

Home address.....

.....Post code.....

Telephone number.....Mobile number.....

Medical conditions / medicines

Emergency contact name.....

Emergency contact number.....

Section of Walk: Full walk - 21 miles Morning - 12 miles Afternoon - 9 miles

Signed.....**Print name**.....

Relationship.....**Date**.....