

## **Group Medical and Consent Form**

All under 18's must have written parental consent to take part in any activity. You must ensure that all participants or parents provide information on any medical conditions and that any required medication is available on the day. Likewise, we need to be aware of any weak or non-swimmers on any water-based activity. Any under 18's without this information will not be allowed to take part.

Group name:		Date of activities:			
Group leader:					
Phone:	Email:				
Address:					
		Postcode:			
Activity description:		Number in group:			
Listing your group's details below c consent with you on the day. If as a alternative to the completion of this	an organiser you h				
Name	Age	Parental consent given (if under 18)	Any medical conditions?	If yes, give details (use back of sheet)	Photo permissions
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
		Yes / No	Yes / No		Yes / No
Name:	Si	aned:		Date:	