



CONSENT FORM

Activity choice	
Kitesurfing	
Coasteering	
SUP / Kayak	

Kitesurfing / Coasteering / SUP / Kayaking are potentially hazardous sports; If the guidelines given by your instructors are not followed you may expose yourself to some risk / danger. Also muscle aches are common place with this activity.

Please complete the following form and email or post back to KA-Kitesurfing to reach us no later than 7 days prior to your course date. **The balance of the course booked needs to be paid in full on the morning of your first lesson (cash or cheque).**

Date of Course:

Full Name:

D.O.B:

Address:

Postcode:

Height/Weight:

Tel No:

Mobile No:

Email:

Name/Address and Contact number of Next of Kin:

Medical Background:

**Do you have any serious Medical conditions? Please state: For example:
High blood pressure/
Heart disease/
Diabetes/ Asthma/
Epilepsy/ Back Problems**

Are you taking any medication at the moment? Please state:

Please sign if you would like to refrain from giving details in this section.

Signed **Date**

Please mail cheques and postal orders to: Elton Elm Bank Road, Wylam, Northumberland, NE41 8HT

Acknowledgement Of Risk

Ka Kitesurfing Adventure Sport takes safety very seriously. Adventurous activities always involve some risk for the participants but we try and keep these to a minimum. There is a chance of minor injuries (bumps, bruises, and possibly minor fractures)

Our team will minimise the risk of danger by.....

- Carrying out risk assessments of all activities
- Giving clear instruction at the start of each activity
- We only use experienced qualified instructors.
- Ensuring all equipment is well maintained.
- Asking participants to supply and medical information before activity starts.
- Ensuring every participant is capable of taking part in their chosen activity.

Please sign to say you agree to the above statement:

Signed: _____

Date: _____

I agree that any photographs/videos taken may be used for publicity and/or marketing purposes.

Signed: _____

Date: _____

Under 18's

Signed: _____
Parent or Guardian

Date: _____