## Individual Booking Form



Group Name (if applicable)	Date of Booking
Urban Saints Guildford	August 2013
Name	
A 11	
Address	
Date of Birth	
Any Medical Conditions	
Any Dietary Requirements	
Emergency Contact Information	
Name	
Dharra Narraham Day	
Phone Number: Day	
Evoning	
Evening	
Undertaking:	
I accept that adventurous activities are hazardous by their nature and accept the risks associated.  It is recommended that personal insurance cover to include damage and/or loss to personal property, personal injury and personal liability be	
arranged individually.  Significant this form significant the above named participant is:	
Signing this form signifies that the above named participant is:  Confident	in water
	y fit to take part in the activities
Willing to comply with all safety regulations, procedures and instructions given by centre staff.	
Please tick the box if we have your permission to take photographs during the	activity sessions
From time to time we may like to get in touch to tell you of offers or news we have. If you do not want to hear from us please tick the box	
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Signature:	
Parent or guardian must sign if participant is under 18	
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