

# APPENDIX IV

## Consent Form

Name of Rockley Adventure Centre: .....

Proposed Date of Trip: From: .....To: .....

Please complete the form and return it to ..... (teacher organising trip) as soon as possible and no later than .....

## Pupil's Details

Surname:..... Forename:..... Male/Female

DOB: ..... Age: ..... Home Tel: ..... Nationality: .....

Address: .....

.....Postcode: .....

## Contact Details

Name of parent / guardian: .....

Daytime tel: ..... Evening tel: ..... Mobile: .....

Name of other contact: ..... Relation: .....

Daytime tel: ..... Evening tel: ..... Mobile: .....

## Consent to Participation

I wish the above named participant to be allowed to take part in the above named trip and consent to him/her taking part in all activities. I have ensured that my son/daughter is willing to participate in all aspects of the trip. In the event of an emergency and the School or Rockley Adventure being unable to contact me, I give permission for any medical treatment deemed necessary to ensure the well being of the above named to take place.

### Payment Schedule

I enclose £50.00 as 1st deposit payment for the trip. I agree to pay the second deposit of £60.00 by 1st February 2010 and the balance by 2 months before the date of departure.

### Cancellation

I understand that deposits and monies paid are non-refundable, unless the reason for cancellation is covered by the insurance policy.

### Terms and Conditions

I have read and agree to the Terms and Conditions for the above trip.

Parent/Guardian signature: ..... Date: .....

### Behaviour and Conduct

I have read, together with the above named participant and we agree to the Behaviour and Conduct guidelines for the above trip and understand the consequences of breaching these guidelines.

Pupil signature: ..... Parent/Guardian signature: ..... Date: .....