

Leisure and Sport Services

Barn Elms Boat House - Booking and Consent Form

Please complete in BLOCK CAPITALS

First Name: _____ Surname: _____

Date of birth: _____ Age: _____ Male Female

Address: _____

Postcode: _____

School: _____

Telephone: _____ email: _____

Name of parent/guardian if participant is aged under 18 years: _____

How did you hear about us? Word of mouth Walking past Leaflet

Wandsworth Borough Council Website Other: _____

Ethnic background: White Black/Black British Asian/Asian British

Chinese Mixed Other (please specify): _____

Does the participant have a recognised disability: Yes No

If yes please state: Visual Learning Hearing Physical

Details: _____

Activity Information

How much rowing experience does the participant have?

Beginner Intermediate Advanced Programme Code (if applicable) _____

Activity/Course Title: _____ Day/Days: _____

Date from: _____ Date to: _____ Start time: _____ End time: _____

Barn Elms Boat House

Barn Elms Sports Centre,
Queen Elizabeth Walk, Barnes, SW13 0DG
Tel: (020) 8788 9472

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Leisure and Sport Services

Medical Health Information

Please indicate below if the participant is affected by an illness or injury that might affect your/their sporting activity. Please note that all information given below will remain strictly confidential.

Asthma Diabetes Epilepsy Heart Conditions

Details if yes to any of the above: _____

Is the participant on any medication/s: If so what and until when? _____

Name of Doctor: _____ Telephone: _____

Name of individual to be contacted in case of emergency: _____

Telephone 1: _____ Telephone 2: _____

Participant's Consent

I, the undersigned, have understood the purpose of the above information, and give my consent for myself/my child to take part in exercise and physical activity sessions organised by Wandsworth Sports Development Team. I have completed the necessary medical details and consent that in the event of illness or accident, any necessary treatment can be administered. I understand that while the instructors and personnel will take every reasonable precaution to ensure that accidents do not happen, they cannot be held responsible for any loss, damage or injury involving, or suffered by myself or my child. Those taking part in river based activities at Barn Elms Boat House must be able to swim 50 metres.

Can the participant swim 50 metres? Yes No

I agree to abide by the policies and directives of Wandsworth Leisure and Sports Services, its staff and agents throughout the entire programme, and understand that if I do not, I may be required to leave the session. I will not be allowed to return unless agreed to by all relevant parties. I understand that there are risks involved in participating in physical activity. I will inform the instructor if my medical condition changes whilst I am taking part in the programme. I am aware that I need the continued consent of my GP to exercise.

Please note that to promote activities, official photographs may be used for official publications promoting activities. If you do not wish to have your picture published, please tick this box.

If you do not wish your child to leave the session without an adult, please tick this box.

Signed: _____ Date: _____

Please make cheques payable to Wandsworth Borough Council. Cancellations are subject to the Leisure and Sport Services Cancellation Policy. Refunds will be considered on an individual basis and a 10% administration fee will be charged for cancellations with one week's notice or more. 20% will be charged for less than one week's notice. Please note: If the coach or Boathouse Manager deems the weather or conditions to be unsuitable, the activity will continue to run inside.

For Office Use Only

Place no:	Total Payable:	Till receipt no:	Paid:

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