



## PARENTAL CONSENT FORM

**EVENT:**

**DATE:**

It necessary to obtain consent for your child to take part in this event. If you wish for your son/daughter to participate please read the following information, complete the form and sign the Parental Consent Notice.

### PARTICIPANT DETAILS

Name	
Date of Birth	
Gender	
Address	
Phone number	
Email address	

### EMERGENCY CONTACT DETAILS

Emergency contact name	
Relationship to participant	
Emergency contact phone number	

### MEDICAL INFORMATION

Please make a note below of any medical conditions you feel we need to know about e.g. asthma. If you have any concerns about your child participating in any form of physical activity then please consult your GP before giving permission for your child to take part in this event.

### NOTE

- Cycling helmets **MUST** be worn at all times during the event.
- Any Participants who persistently misbehave or put others in danger will be asked to leave the activity and will not be allowed to continue.
- A parent or responsible adult **MUST** remain on site for the duration of event.

### DISCLAIMER

Being the parent or guardian of the above rider:

- a) I understand and agree that my son/daughter participates in events promoted by TweedLove entirely as his/her own risk. I have considered and understand the nature of such and have discussed them with me son/daughter. I am satisfied that

*Any information provided about your child will be kept secure and confidential. It will only be used for the purpose of contacting you or your child regarding future TweedLove events.*



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my son/daughter is sufficiently responsible and competent to assume full and entire responsibility for his/her own safety whilst engaged in this event.

- b) I agree that my son/daughter shall participate in such events without any liability whatsoever on the part of promoter, promoting club or any organisation affiliated thereto or their officials or members in respect of any injury, loss or damage suffered by him/her, provided that this does not exclude the liability of any such party for death or personal injury arising from that party's negligence
  
- c) I confirm that my son/daughter does not have any disability or medical conditions, physical or mental, which could affect his/her ability to ride safely in the event entered.
  
- d) I understand that my son/daughter although supervised must assume full and entire responsibility for their own safety in relation to traffic and other road users. I understand and have emphasised to my son/daughter that the function of marshals/guides in such events is to do no more than indicate the direction the rider should take and that responsibility for safety whilst negotiating corners, turns and other hazards must rest with the rider alone.
  
- e) I understand further and have impressed upon my son/daughter that all participants in events on the open road must observe the law of the land relating to road travel.
  
- f) I agree for official event photographs of my son/daughter to be used for publicity purposes by the organisers.

Signed (Parent or Guardian) \_\_\_\_\_ Date \_\_\_\_\_

*Declaration: By signing this I confirm that I am the parent or guardian of and holding legal responsibilities for the above rider.*