

## GOLD DofE open consent form

Painting residential 8th - 16<sup>th</sup> August 2017

Passport Details Participant's Name as on passport							
				Date of Birth			
	expeditions)						
	Passport no						
·	Date of Expi						
Travel insurance							
Travel insurance company	Policy	no					
Travel insurance 24hr claims num	nber						
Responsible Adult to be contact	ted in case of emergency						
Name Relationship to participant							
Address (if different from above	e)						
Home Phone	Work Pho	ne					
Mobile							



Duke of Edinburgh's Award	
E-DofE number	Date of gold practice expedition
Area of gold practice expedition	
Medical Information	
Do you suffer from any medical co	nditions? Yes / No
If yes please give details	
Any other recent illnesses or injur	ies which may affect your ability to participate? Yes / No
If yes please give details	
Are you allergic to anything (e.g. pe	enicillin, elastoplast, peanuts)? Yes / No
If yes please give details	
Do you take any medication? Yes /	No
If yes please give details including	dosage and timing
	nts (vegetarian, vegan, gluten free, halal)? Yes / No
If yes please give details	

### Photographs and Video

As part of the activities Berber Treks may video or take photographs of you to be used with discretion in promoting the activities of Berber Treks in printed publications and on the internet.

Can we use your image in this way? Yes / No

### Acknowledgement of Risk

We have taken all reasonable steps to provide participants with the level of care and assurances of safety appropriate to the activity. However there are certain risks which are integral to the activity and cannot be eliminated without destroying the unique character of an expedition and/or residential project.

During the expedition you may encounter the following:



- · walking on rough terrain.
- · extended physical effort.
- environmental hazards (changeable weather etc).
- · feeling uncomfortable, tired and upset.

Can you swim 50 metres? Yes / No

#### Medical statement

In the event of an accident I give my consent to any emergency treatment, as considered necessary by the medical authorities present. I therefore authorise the staff of Berber Treks to sign, on my behalf, any written form of consent required, provided that in the opinion of the doctor/surgeon any delay could endanger the health and safety of the participant.

#### Agreement

I wish to take part in the expedition provided by Berber Treks. I confirm that I am fit and able to undertake an expedition where I will be active for up to 8 hours a day in mountainous terrain whilst carrying and operating necessary expedition kit.

I agree to follow the instructions of Berber Treks staff. I understand that I will need to work as part of a team and agree to show respect to my fellow participants at all times.

I confirm that I have read and understood the content of this document, I agree to the booking terms and conditions and I understand what I will be participating in.

Participant's Signature		
Name		
If you are under 18 years old this form will also need to be signed by a Parent or Guardian.		
Parent or Guardian's Signature		
Name	Date	

By signing this you do not release Berber Treks from any of its obligations, nor does it affect your legal rights.



#### **Data Protection**

The personal data that you provide will be handled by Berber Treks in accordance with the Data Protection Act 1998. It will be used by Berber Treks for the purpose of administering and delivering training and expeditions only.

### Payment details

To secure your place, please return the completed form along with 50% deposit. Payments can be made by cheque made out to "Berber Treks Ltd" and posted to 8 Gorse Court, Guildford, Surrey GU4 7XZ or by bank transfer to Sort code: 40 45 22 Account no: 91713175. The 50% balance is payable 10 weeks before departure; 30<sup>th</sup> May 2017. Travel insurance should be put in place at the time of booking and all bookings are made in accordance with our Terms & Conditions which can be read on our website. If you have any questions please call Georgina on 0773 824 2619 or email info@moroccotreks.co.uk

NB. If you are sending completed forms via email please use WeTransfer  $\frac{https://www.wetransfer.com/}{}$  to avoid filling up our inbox  $\odot$ 

Many thanks for your booking!