



REGISTRATION FORM

**Tideswell Safer Neighbourhood Policing Team
Miller's Dale Bridge Sponsored Abseil
Saturday 15th May, 2010**

This form must be completed by every person wishing to participate in the abseil and sent to Dukes Barn. All information contained in this document will be treated as confidential.

1. Personal details

Forename: Surname:
.....
Address:
..... Postcode: Home phone no:
Work phone No: Email:
Date of birth: Age: Sex:
Relevant details of any disabilities:
.....

2. Emergency contact numbers

Name: Relationship:
Home Address:
Home phone no: Work phone no: Mobile:
Family Doctor Name: Surgery phone no:
Address:

3. Medical information

Are you taking any medication? Yes / No.
Please give details
Are you allergic to any medication? Yes / No
Please give details
Have you had a tetanus injection in the last 5 years? Yes / No Date
Do you have epilepsy? Yes / No
Please provide any other details which may be helpful to the instructor:
.....

4. Declaration

I agree to participate in the sponsored abseil and donate a minimum of £50 to Dukes Barn.
I understand that although potentially hazardous, the activity will be led by an experienced instructor who holds the relevant awards or qualifications and who will maintain a high level of safety throughout the activities. I acknowledge the need for responsible behavior and that the instructor's word is final on all matters of safety.

Signed: **Print name:** **Date:**.....

**Please return your completed registration form to:
Dukes Barn, School Lane, Beeley, Derbyshire, DE4 2NU.
Dukes Barn - Registered charity No.1081656**