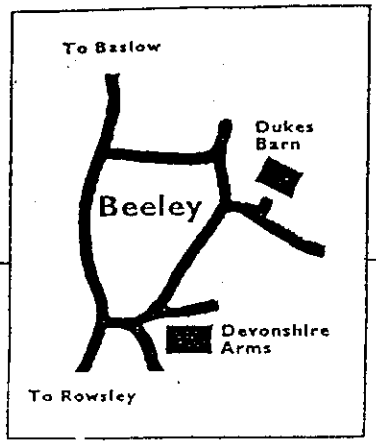
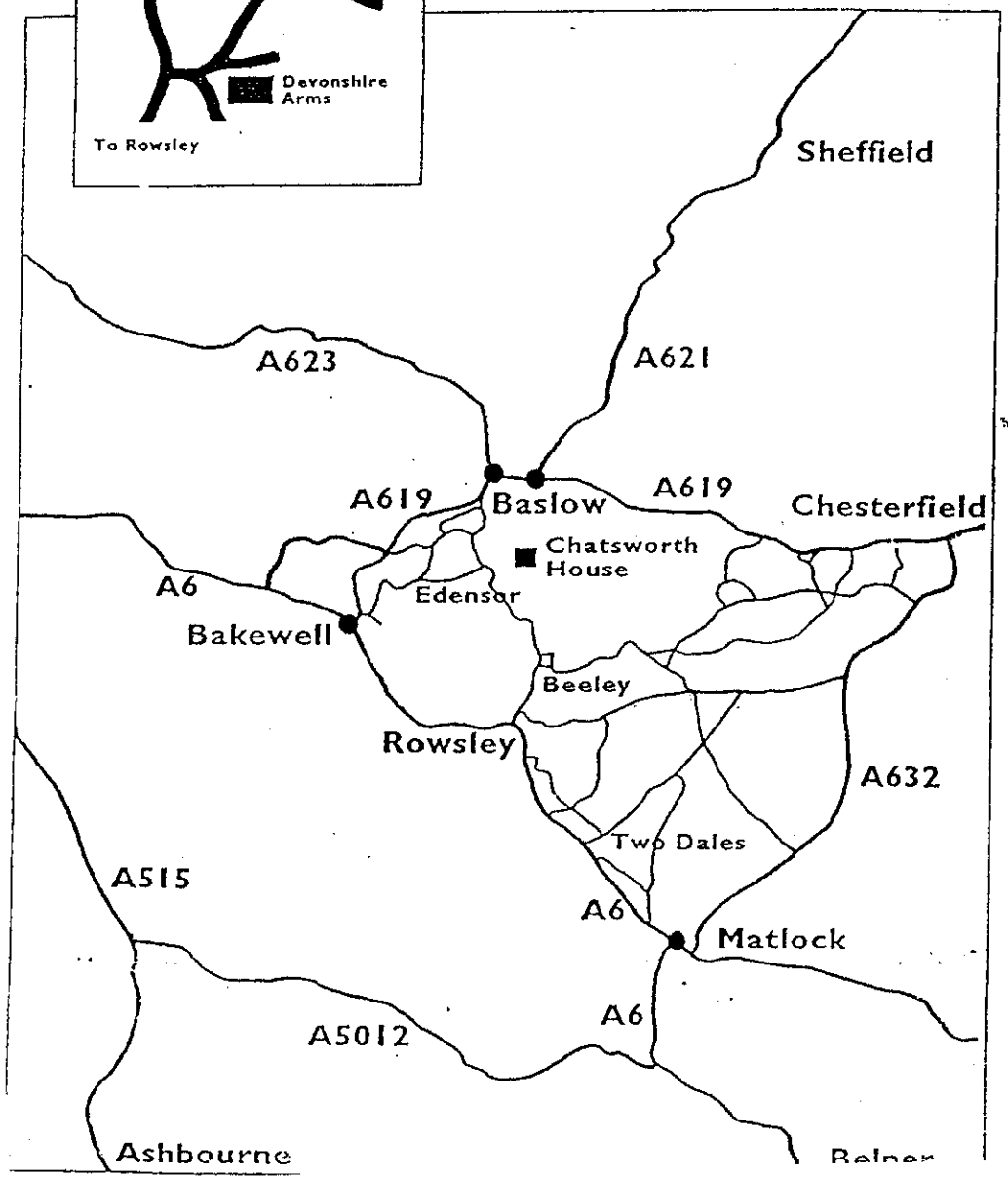
How to get to the Dukes Barn

- ◊ Turn into the village by the Devonshire Arms
- ◊ Take the first left turn,
- ◊ the Devonshire arm is now on your right
- ◊ Turn left and go up hill towards the church
- ◊ Turn right at the triangular island with the large tree
- ◊ Turn into the first drive on the left, just after the blue and white village hall
- ◊ Continue through the arch and park





ADULT

CONSENT FORM

DUKES BARN

Course date(s) .....to.....

This form must be completed by or on behalf of every person before they may participate in any activities organised by Dukes Barn.

All information contained in this document will be treated as confidential and will only be viewed by the Course Co-ordinator and the Instructor leading the activity.

1. Personal details

Forename .....Surname.....

Address.....

.....Phone No.....

Date of birth .....Age .....Sex.....

Relevant details of any physical disabilities

.....

.....

Relevant details of any learning disabilities

.....

.....

2. Contact Numbers

Name.....Relationship.....

Home Address.....

Home phone no .....Work phone no.....

If not available, please contact:

Name.....Relationship.....

Home phone no ..... Work phone no.....

Family Doctor Name.....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

.....

If the course is residential please give details of any dietary requirements

.....

4. Declaration

I agree to have the opportunity to participate in adventure activities. I understand that although potentially hazardous, these activities 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 needs for responsible behaviour and that the instructors' word is final on all matters of safety.

Signed ..... Print name .....Date .....

DUKES BARN

PARENTAL CONSENT FORM

Course dates from.....to.....

This form must be completed by the parent or guardian of any person under the age of 18 before they may participate in any activities organised by Dukes Barn.
All information contained in this document will be treated as confidential and will only be viewed by the Course Co-ordinator and the Instructor leading the activity.

1. **Personal details**

Forename .....Surname .....
Address
.....
.....Phone No .....
Date of birth .....Age .....Sex .....

2. **Medical information - Does your child**

Have any medical or physical condition ? YES/NO .....
Is he/she taking any medication ? YES/NO .....
Is he/she allergic to any medication ? YES/NO .....
Has he/she had a tetanus injection in the last 5 years YES/NO .....
Please provide any other details which may be helpful to the instructor.....
.....
If the course is residential please give details of any dietary requirements.....
.....
Medical Declaration: - I undertake to inform the Dukes Barn as soon as possible of any change in the medical circumstances between the date of signing this and the course. I agree to my son/daughter.....(name) receiving emergency medical treatment, including anaesthetic, as considered necessary by the medical authorities present.

Signed.....Print Name .....Date.....

3. **Contact Numbers** I may be contacted by telephoning the following numbers:-

Name..... Relationship.....
Home Address.....
Home phone no .....Work phone no .....
If not available, please contact: Name .....Relationship.....
Home phone no ..... Work phone no .....
Family Doctor Name.....Phone no .....
Address .....

4. **Declaration**

I agree to my son/daughter ..... having the opportunity to participate in adventure activities. I understand that although potentially hazardous, these activities 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 needs for responsible behaviour on my child's part and that the instructors' word is final on all matters of safety.

Signed ..... Print name ..... Date .....