

Redditch District Scout Council

TREK CHALLENGE INFORMATION AND CONSENT FORM

To be completed legibly in ink, delete (*) items as appropriate

THIS PART TO BE RETAINED BY *PARENT/GUARDIAN

Please return lower section of this form completed and signed, to the Trek Challenge Committee at the start of the Trek Challenge.

Activity: THE TREK CHALLENGE ACTIVITY HIKE
On: 4th October 2020
At: Inkberrow
Start Time: 8.30 am (Approx)
Finish Time: 6.00 pm (Approx)

ADDITIONAL INFORMATION (For use on day of Trek Only)
Base Contact: Dawn or Jon
Telephone: Mobile 07748 717365 / Mobile 07870 592665
PLEASE NOTE: Any Emergency situation will be dealt with by Trek Challenge Marshals who will be on constant patrol.

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PARENT / GUARDIAN CONSENT - *This section to be handed in at the start of the Trek Challenge*

Over 18's please provide name and contact details for an emergency contact and details, if any, of any current medical treatment

I have noted the arrangements and I give permission for _____ to take part in the Trek Challenge 2020.

I can be contacted during the day at _____

and by telephone No _____ / Mobile No. _____

Please state if your child has a disability or condition which might be affected by this activity

Please detail any medical treatment that the above named person is currently receiving.

Signed: _____
(*parent / guardian)

Name: _____

Date: _____

SPECIAL NOTE

****Photographs will be taken on the Trek if you object to this please advise at start****

****All Personal Data Collected is for use on the Trek Challenge event only and is destroyed after 12 months****

Please tick box that you have read these special notes. ☐ Thank you

No One Will Not Be Allowed To Walk without this completed Consent Form