



New Rider Consent Form

Full Name		Date of Birth	
Address (inc postcode)			
Contact Number (inc area code)			
Home:		Mobile:	
Other:			
Are there any long-term illnesses, health problems or disabilities we should be aware of? e.g. vision difficulties, hearing problems, learning disabilities etc.			
Medical Information including allergies?			
Please give details of any medical information that we should be aware of			
Is there any other information we should be aware of?			
Is the rider a child or vulnerable adult?			
Yes.....		No.....	
Emergency Contact or Next of Kin			
Name	Relationship	Tel (1)	Tel (2)
Travel Arrangements for Returning Home – if there are any changes to this, parents/guardians need to communicate this to the ride leader/event organiser.			
Will be collected by.....		Will make their own way home	
Location of collection		Yes / No	



Photography

Photographs are often taken during club activities for use on promoting cycling events on the club website and social media. These are often group shots of cyclists on different events. If your child or vulnerable adult does not wish to appear in photographs you need to make this clear to the ride leader/event organiser. If not it will be assumed that you are consenting to the use of photographs being used as stated above.

Declarations & Consent

To be completed by the rider, parent or guardian or of any young person under 16, or carer of any vulnerable adult. I (Name and Address)

.....
.....

being the rider, parent / guardian / carer (select) of named above person hereby I agree to/him/her to take part in the activities of Cheshire Cycling Club in my absence and acknowledge that I have been advised as to the nature of the club's activities. I understand that club members and officials will take reasonable steps to ensure the safety of all participants.

I accept that I/he/she must assume full responsibility for my/his/her own safety and compliance with UK law. I am satisfied that my/he/she is sufficiently responsible and competent to ride in a manner which is safe for myself/himself/herself and others.

I agree that I/he/she taking part in the club's activities entirely at my/his/her own risk and without any liability whatever on the part of Cheshire Cycling Club, its officials or members in respect of injury, loss or damage suffered by myself/himself/herself howsoever caused.

I undertake to inform a Ride Leader of any changes in the information provided on this form.

Signed (Rider/Parent/Guardian):

Print Name:

Date:

Date: