



MEDICAL QUESTIONNAIRE

To be completed by all participants before commencing any activity. This information will be held in confidence in accordance with our privacy/data protection policy until such time as the information is required.



Name: _____ Sex: Male / Female

Date of Birth & Age: (___ / ___ / ___) ___ yrs old

Address: _____

NEXT OF KIN:

Name: _____ Tel: _____

Address: _____

DOCTOR:

Name: _____ Tel: _____

Surgery/Practice Address: _____

➤ Do you suffer from any of the following (please tick box):

A Bad Back Asthma Migraine Diabetes High Blood pressure Epilepsy

➤ Do you have any allergies (such as Penicillin, Aspirin, food allergies, etc.)? (YES / NO)

Please provide information: _____

➤ Are you currently on any medication? (YES / NO)

Please provide information: _____

➤ Dietary requirements (please tick box):

Vegetarian Dairy Free Coeliac Nut Allergy* Other

* Whilst every effort is made to eliminate any traces of nuts, it cannot be guaranteed. By signing this form, you accept and understand this statement.

➤ Is there any other information you feel we require including any other medical condition not mentioned above?

Please provide information: _____

Statement of Risk - Call of the Wild places safety as a top priority. Adventurous Activities involve some risks for the people taking part; we aim to keep these risks as low as possible. The chances of serious injury are extremely low, but the chance of minor injuries, (bruises, bumps and, less likely, minor fractures), are a possible result of taking part in Adventurous Activities. We will minimise these dangers by:

- Carrying out a careful assessment of all risks before commencing the activity.
- Only using experienced instructors with the appropriate qualifications for the activity.
- Giving clear safety instructions to everyone participating.
- Ensuring equipment and clothing is well maintained and suitable for the activity and environment.
- Ensuring activities are within the capabilities of the participants.
- Asking participants to supply any medical conditions or information.
- Ensuring good hygiene standards are kept.

We expect participants to co-operate with Call of the Wild and our team to ensure the safety of all participants, by following instructions, answering questions honestly about any medical conditions, or other information relating to health and safety.

Consent – By signing this form I agree to my son/daughter taking part in the activities, tests & evaluations during the day/residential. I understand that my son/daughter will take part at his/her own risk and accept that no responsibility for accidents or injuries, or loss or damage to personal property rests with the supervisory staff, unless proven to be caused by their negligence. I declare that to the best of my knowledge my son/daughter is competent and medically fit to participate in the activities as part of the group. I agree that a similar activity may be substituted due to safety factors or weather conditions. I agree that medical treatment will be given if necessary and in the case of emergency. I understand the information from this form may be stored digitally.

Images - I agree that my son/daughter photographs may be used for publicity/marketing purposes: (YES / NO)

Parent/guardian signature for under 18's:

Signed: _____ Print: _____ Dated: _____



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What we collect

We may collect the following information:

- Name
- Personal Contact information including e-mail and date of birth
- Demographic information such as postcode etc
- Vital medical information relevant to programme/activity attended
- Dietary requirements for medical and customer service reasons
- Next of kin or parent contact details for under 18's
- Payment details

Why we collect

We require this information to understand the needs of the children, provide them with a better service and protect their health and wellbeing

What we do with the information we gather

What we do with the information:

- Internal record keeping and processing of bookings
- Ensure all attendees are physically fit and able to undertake activities/programmes
- Use it to design and deliver programmes which are suited to the age and physical ability of the children
- We may use the information to improve our products and services.
- From time to time, we may use the information to customise the website and marketing materials.
- We will not sell, distribute or lease your personal information to third parties unless we are required by law to do so

Security

We are committed to ensuring that your information is secure. In order to prevent unauthorised access or disclosure, we have put in place suitable physical, electronic and managerial procedures to safeguard and secure the information we collect online.

Full privacy statement can be viewed here - <http://www.school-residentials.co.uk/privacy-and-cookies-policy/>