

Parental / Guardian BMX Pay & Ride Consent Form

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| Session name: | Session time: | Session date: |
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DECLARATIONS AND CONSENTS

By signing this form I, being the parent/guardian of the below named child:

- Give my consent to my child participating in activities at Lee Valley VeloPark and I understand and agree that participating is entirely at my child's own risk;
- Confirm I have considered the nature of the activities and the risks involved and have discussed them with my child;
- Confirm I am satisfied that my child is sufficiently competent and able to take responsibility for their own safety and to listen to and understand any safety briefings given to them;
- Agree that first aid may be administered to my child if deemed necessary by a suitably qualified person;
- Confirm I have provided details of all of my child's medical conditions and/or allergies which I consider might be relevant and will ensure my child has any treatment close to hand;
- Confirm that my child will observe and comply with the BMX track etiquette at all times.
- Where using own equipment, I confirm that it complies with the applicable British safety standards and the other requirements set out in the Lee Valley VeloPark terms and conditions;
- Understand and accept that my child will follow venue staff instructions and I have discussed the importance of this with my child;
- Confirm I understand that the Better Terms and Conditions and Lee Valley VeloPark Terms and Conditions apply.
- We may occasionally film or take photographs of participants for publicity purposes, which may include reproducing images on the Better and Lee Valley Regional Authority websites. Please tick box if you do not agree to us take photos or film your child.
- By completing and signing below, being the parent/guardian of the below named child/rider, you are providing consent for the child/rider to participate in the activity.

PARTICIPANT AND PARENT/GUARDIAN INFORMATION

| Child's full name | Child's date of birth | Parent/ Guardian's print name & signature | Emergency contact number | Details of any medical conditions or allergies your child has which you would like to make us aware of | I do not agree to photographs / video footage that includes my child being taken |
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