Please list all activity participants below. Please use another sheet if more space is required and attach to this form. For clarification on any condition you think we should know about, please contact the centre to discuss details further. The centre should be notified of any changes to this list as soon as possible.

Full name (please print)	**Medical Condition(s)** This is important please refer to Form TALBF005 – 'What You Should Know'.	**D.O.B.** If under 18yrs	**Emergency contact person**	**Emergency Contact Number**	**Please sign to say that you have read and understood the information on Form TALBF005 'What You Should Know'**

Office Use Only – Documentation Checked					
Public Liability Insurance cover (£5 million….)	Yes	No	Relevant Qualifications	Yes	No
Criminal Record Bureau Checks	Yes	No	Safeguarding Children Policy	Yes	No
First Aid Qualifications	Yes	No	NGB Membership	Yes	No
Signed copy of the TAL-PHOTO1 – Permission to use image taking equipment form.				Yes	No
Parental Consent Form for any person under the age of 18yrs wishing to take part in any water sport activity at Castlegate Quay or Teesside White Water Course				Yes	No

Name		Signature		Date	