



providing outdoor
adventure and
activities for all

activities and adventures

Peak District based outdoor activities

Person Making Booking on behalf of a group:

Name:Male/Female Date of Birth:.....
Age:.....

Address:.....
.....

Post Code:

Telephone (home): (work):

Email.....

Others participating in the group:

1. Name:Male/Female Date of Birth:.....
Age:.....

2. Name:Male/Female Date of Birth:.....
Age:.....

3. Name:Male/Female Date of Birth:.....
Age:.....

Special dietary requirements of course participants (residential courses only):

.....
.....

HEALTH:

Is everyone in your party physically fit to take part in the course for which you are applying? YES / NO

Please give details of any relevant physical disability or medical condition :

.....
[Additional details over leaf if necessary]

Participation Statement

One of the attractions of outdoor pursuits are their adventurous nature. Accident rates in mountaineering / hill walking are thankfully low and CDMS Activities have a 100% good safety record. However with all adventurous activities there is the possibility of accidents occurring. It is important that course participants accept the guidance of CDMS and its representatives.

AGREEMENT

1. I agree to abide by such safety requirements as CDMS Activities or its representatives may consider advisable.
2. I have read the course description and course notes and understand that I can obtain further information if required.
3. I have read and understood the Participation Statement.
4. I understand that CDMS Activities is under no liability whatsoever in respect of personal loss or injury that I sustain, except as required by law. If I wish personal accident insurance I shall arrange some.
5. I understand that if I withdraw from the course my deposit will be forfeited.
6. I also understand that if I withdraw within twenty eight days of the start of the course for whatever reason I am liable for the full fee.
7. If the course is cancelled by CDMS Activities for whatever reason, I understand that I will be offered the option of alternative dates or a full refund.
8. The people in my party are aware of this agreement and participation statement.

Signature:

Date: