



## Application form

### BCU Kayaking Course 1 & 2

First Name	Last Name	Date of birth

#### Contact details

Address	Email	Phone

#### Emergency Contact details

Name	Email	Phone	Relationship

#### Forces Service details

Service Number	Your Current or Ex Unit - include address	PRO or Welfare Officer - include phone number

#### Passport details - for overseas trips only

Passport number	Nationality	Expiry date

Have you ever Kayaked before, If **YES** who with and where?



**Injury, Injuries or condition details**

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Medication currently being used	Equipment you will require
	If you need your wheelchair please give Height, Weight and depth

Other special requirements	Name and address of GP or MO

Can you share a room?	Dietary requirements
Yes / No	

**Travel details**

Car Make	Model	Registration



## **Pilgrim Bandits Charity**

### **RISK ACCEPTANCE FORM**

#### **The Pilgrim Bandits Charity**

We accept responsibility to make its expeditions as safe as is reasonably practicable. However, adventurous activities are inherently hazardous and cannot be completely risk free, however hard we try.

Accidents can happen without any contributory negligence from the charity or its staff. The charity can accept no responsibility for loss or damage to personal property or for personal injury not arising as a result of its own act or default.

I understand and accept the above statements and accept that I have a responsibility to take careful note of instructions and to act in a way that will minimise the likelihood of injury.

I am fit for the expedition and will inform the charity before the expedition of any special medical conditions that might affect my safety.

I declare that the information entered above is true at the date it was submitted:

I understand that I am representing the charity Pilgrim Bandits and will do nothing to bring the charity into disrepute. I also agree to wear the charity clothing supplied to help promote the charity when asked.

Print Name .....

Signature ..... Date.....