

## Day Adventures Activity Booking Form



Surname		Initials	<u>_</u> F	irst Name		Title	
Home & Invoice						· ·	
address							
				Postcoo	le:		
Telephone (Day)	Telen	hone (Mo	hile)	Email			
	10.00		<u> </u>				
Activities Required:							
Full Day Activities: see	e page 2 fo	or standard	times				
Mountain walk, Rock clir	nbing & a	bseiling, Ca	noeing,				
traversing, Coasteering, building.	Gorge wa	alkıng, Mine	explora	ation, sea kayak , si	t on top kay	ak leam	
Mountain biking and whi charge for equipment hir		•		•	note there i	s an extra	
				the operator.			
Half Day Activities: see Raft building, Abseil, Ori				oblem solving			
real building, Absoli, On	critecring	, repes coe	1130, 1 10	obiem solving.			
Other activities which a Rock climbing, Lake can			ay if a f	full day is not requ	ired:		
Nock climbing, Lake can	loenig and	i kayakilig					
Evening Activities: Lo	w ropes, (	Orienteering	ı, Proble	em solving, Climbing	g wall.		
Please contact the centr	e for deta	ils concerni	ng any (	of these activities.			
Date required		A	ctivity		Co	st	
200 104000							
Dealing Dealerstien							
Booking Declaration	<u>1.</u>						
Signed				Date	1	1	





#### Please can you also provide us with the following information (if possible):

Group age range		Group numbers		Do you have your own minibus / transport?	YES/NO
Specific gr	•	nation ecial needs (physical	l hehavioural	Does your minibus have	
		to plan a safe activi		a tow bar? (if applicable)	YES/NO
				How many seats does your minibus have?	
Previous a	•			Will you need to borrow	
experience	(If any)			any equipment? See matrix on page 5.	YES/NO
				If YES please contact the centre and return the attached form (page 4) if necessary.	

Where do you wish to meet?	Blue Peris	Other meeting place – please state
Please note that meeting at Blue Peris is essential for activities requiring a wetsuit, namely sea kayaking and coasteering. If you choose to meet elsewhere and need to borrow equipment it is necessary to complete the form on page 4.		

# Payment will be made ( please circle ) Full payment is required at the time of booking

Cheque (if so please enclose) Make payable to Fusion Lifestyle

Credit / Debit card ( please contact the centre )

Purchase order ( pleas contact the centre )

#### **Ratios**

#### Full Day activities (Except mountain walking)

This is based on 10 - 12 students and 1 member of visiting staff.

#### **Half Day and Evening Activities**

This is based on 10-12 students and 1 member of visiting staff.





#### **Mountain Walks**

Safe operating groups are a max of 1:12 plus a visiting member of staff, depending on routes and terrain. This is based on guidance from the Adventure Activity Licensing Authority (AALA).

#### D of E Supervision

Safe operating groups are a max of 1:12 depending on routes, terrain and the nature of the supervision required. For some expedition supervision a group size of 1:6 may be more appropriate. This is based on AALA guidance.

#### **Standard Times**

A standard day starts at 9.15am and finishes at 4.45pm. A half day is either 9.15am to 1.00pm or 1.00pm to 4.45pm. Should you wish to meet at a venue rather than the centre a later start or earlier finish may be required to enable an instructor to load equipment and travel. An evening is from 6.30pm to 8.30pm.

Earlier starts and later finishes are negotiable but would incur increased charges.

#### Other Information:

#### Groups where students are under 18 years of age

For groups with students under 18 we require a member of staff over 18 to act *in loco* parentis. This person will be responsible for the pastoral care and behaviour of the group.

#### **Transport**

Transport is *not* included for visiting staff and students.

#### **Mountain Bikes and White Water Rafting**

There will be an extra charge for equipment hire and venue hire as charged by the operator. Please contact the centre for up to date charges.

#### **Consent and Medical Forms**

You will need to hold emergency contact and medical details for each person, both under 18 and all adults to be passed on to the instructor. Consent forms are available on the web site and within this information pack.

#### **Food and Drink**

These are not provided. You will have to ensure that all group members have an adequate packed lunch and drink in a bottle for the activity. Please bear in mind that many activities are strenuous and thus place significant nutritional demands upon the participants.

#### First Aid

All instructors are qualified in first aid and will carry first aid kits appropriate for the activities. We recommend that in addition to this you have a comprehensive first aid kit to be left in your vehicle(s).





## **Specialist Equipment Pro Forma**

All specialist equipment will be provided by the centre. The cost of this equipment hire is included in the instructional charges. For example we will provide harnesses and helmets for rock climbing, canoes, paddles helmets and buoyancy aids for canoeing.

In addition many activities require equipment such as Wellington boots or walking boots, fleece jumpers and waterproofs which many people already possess. Should your group not be able to provide these items for themselves they can be borrowed from the centre. Please note that the time required sorting out and issuing this equipment will impinge upon the time spent enjoying the activity sessions.

If your group is NOT meeting your instructor at the centre please fill in the form below and return it with your booking form. If you need to borrow any of these items but are meeting at the centre please let us know but the sizes etc can be organised upon your arrival.

Name /	Waterproofs -	- child/adult size	Fleece	Footwear	(Size)	Rucksack (tick)
person number	Jacket	Trousers	Child/adult size	Boots	Wellies	





### **Equipment Requirement Matrix**

Whilst we will provide specialist equipment the following matrix outlines the equipment groups may prefer to provide for themselves, some of which can be borrowed from the centre if required. Please note that the time required sorting out and issuing this equipment will impinge upon the time spent enjoying the activity sessions. Unless wearing a wetsuit you should wear lightweight and flexible clothing such as quick dry trousers or jogging bottoms (no jeans), a t-shirt and warm top (fleece or wool is best). Trainers are the best footwear unless otherwise stated. And if you have your own wetsuit you can bring it along!

	Can be borrowed				Must be brought				
Activities in bold need equipment to be in a rucksack	Waterproof Jacket	Waterproof Trousers	Wellies	Walking Boots	Fleece	Old Trainers	Spare Jumper	Hat and Gloves	Towel and change of clothes
Mountain Walk	*	*		*	*		*	*	
Rock Climbing	*	*					*		
Abseiling	*	*		*			*		
Canoeing	*	*	*		*				*
Kayaking					*	*	*		*
Sea Level Traversing	*	*	Either* winter			Or * summer			*
Coasteering			William			*			*
Gorge Walking	*	*	*		*				*
Orienteering	*	*							
Mine Exploration	*	*	*		*				*
Problem Solving	*	*						*	
Raft Building	*	*	Either* winter		*	Or* summer			*
Ropes Course	*	*							
Mountain Biking									*
White water Rafting									*
Climbing Wall									

Please contact the centre for further details as these requirements do vary according to the time of year and weather conditions. Wellies are better than trainers in the winter for sea level traversing due to the cold, but in the warmer months trainers are fine

G Drive, General, Courses info





### Confidential -Adult -Over 18 Personal Details/ Medical Form

Course date booked:	School/college if applicable.						
Surname:	Forename:		National Health No .	Age:	Sex:		
Home address:		Email:		<u> </u>			
	Mob:						
		Date of birth:					
Next of kin and Address:		Doctors name and	address (student's):				
24h Contact Tel:		Contact Tel:					
Work Tel:		Email:					
Are there any special medical or physical circumstances	of which the Cont	o staff should be aw	aro o g				
asthma/epilepsy/diabetes/dislocations/disabilities: or a	ny ALLERGIES e.g.	Penicillin/ aspirin/ el	lastoplasts?				
Please give all relevant details about how something cou information about how an activity might affect you, and							
participate (continue on another sheet if necessary)							
Are you receiving any regular medical treatment?							
Give details and the required dose							
Is your tetanus up to date?		Date of last va	accination:				
Swimming ability: (please circle distance) You must be able to swim 25m to go White Water Raftin		Ion swimmer	25m	5	0+m		
Details of any special dietary requirements e.g. vegetaria	•	llergies:					
I understand the conditions which I have been accepted on a c Centre Manager or his representative and I agree to receivin			•	-			
physician concerned, the delay in contacting my emergency co agree to indemnify these against all claims, costs, actions and	ntact may affect my	health In considera	tion for the Centre staff and	l Fusion Lifestyle	? <i>I</i>		
administration of medicines unless such claims, costs, actions understand that the centre does not provide cancellation insu	or demands result	out of the negligence	of the Centre staff or Fusio	n Lifestyle I al	lso		
coach, holiday issues, home issues, personal issues, accidents Fusion Lifestyle			•	· · · · · · · · · · · · · · · · · · ·			
If you do not permit photos/videos to be used as pul	blicity material / s	ocial media the Cen	tre or Fusion Lifestyle ple	ase tick the bo	р <b>х</b> :		
Signed:		Date:					





# Confidential — <u>U18's Personal Details/ Medical Form</u> This form must be signed by the parent or guardian of children under the age of 18.

Course date booked:	orginea by the pare.	School/college:					
Surname:	Forename:		National Health No .	Age:	Sex:		
Home address:		Email:					
		Home Tel:					
		Mob:					
		Date of birth:					
Next of kin and Address:		Doctors name and a	ddress (student's):				
24h Contact Tel:		Contact Tel:					
Wash Tali		F.m.s.il.					
Work Tel:		Email:					
Are there any special medical or physical circumstance							
asthma/epilepsy/diabetes/dislocations/disabilities: of Please give all relevant details about how something				ou nood additio	nal		
information about how an activity might affect you, o							
participate (continue on another sheet if necessary)							
	2						
Is your child receiving any regular medical treatment Give details and the required dose	ŗ						
Do you wish a member of staff to look after any med If so, you must hand all medications and instructions		e coordinator					
Do you give permission for paracetamol/Calpol to be	given to your child						
Is their tetanus up to date? Their swimming ability: (please circle distance)		Date of last va Non swimmer	ccination: 25m	5/	0+m		
You must be able to swim 25m to go White Water Ra	fting	Non swiffiner	23111	30	UTIII		
Details of any special dietary requirements e.g. veget	tarian, Halal or food	allergies:					
I understand the conditions under which my son/daughter I part in the activities organised by the Centre Manager o	=						
deemed necessary, should, in the opinion of the physician	concerned, the dela	y in contacting myself be	potentially injurious to my	y child's health.	In		
consideration for the Centre staff and Fusion Lifestyle 1/ resulting from taking part in the programme of activities of	_						
the negligence of the Centre staff or Fusion Lifestyle. I also	understand that the	centre does not provide of	cancellation insurance. The	erefore, the cent	re		
will not be liable s in view of student/s who do not attend prevent them attending. Finally students possessions are no			ome issues, personai issue	s, acciaents whic	cn		
If you do not permit photos/videos to be used as	publicity material ,	/ social media the Centi	re or Fusion Lifestyle ple	ase tick the bo	х:		
Signed:			Date:				



