Adventure Northumberland Participant Risk Acknowledgement & Medical Consent

Outdoor activities such as coasteering, kayaking, and rock climbing involve inherent risks (e.g., slips, immersion, environmental exposure). While all reasonable steps are taken to manage risk, these cannot be eliminated entirely. By signing below, you confirm that you understand these risks, are physically fit to participate, and will follow all safety instructions and you understand participation is voluntary.

Participant Name:	DOB (For unde	r 18s):
Address:		
		
Phone:		
Emergency Contact Name:	Relationship:	
Phone:	_	
Medical Conditions (if any):		
☐ I give permission for my child (if under 18)		
☐ I have added additional members of my far I confirm that I have declared all relevant heal		r of this form, and in signing it
\square I give permission for Adventure Northumbe	erland staff to administer first aid i	f required.
Signature:	Date: (Parer	nt if under 18)
Name of signee:		
If Participant is under 18, your relationship: _		



Adventure Northumberland | The Hut | Craster | Northumberland NE66 3SS