



**TOLLYMORE NATIONAL OUTDOOR CENTRE**

**ADULT HEALTH DECLARATION**

**NAME:** .....

**DATE:** .....

**COURSE PARTICIPANT**

**NAME:** .....

**ADDRESS:** .....

.....

**TELEPHONE:** (Day) ..... (Evening) .....

**CONTACT IN CASE OF EMERGENCY**

**NAME:** .....

**ADDRESS:** .....

.....

**TELEPHONE:** (Day) ..... (Evening) .....

**THE DEMANDS OF YOUR COURSE**

The training undertaken at Tollymore National Outdoor Centre often involves strenuous physical exercise. Participants can be exposed to cold and wet conditions and circumstances where the manual handling of heavy loads is required. Applicants should seriously consider their personal health and fitness before attending courses. Anyone suffering from or ever having suffered from any medical condition, illness, injury or allergy or who is pregnant should consult their doctor only attend following positive advice from their doctor and should make their condition known to the instructor supervising their course.

**DECLARATION**

**I have read and understand the likely demands of this course and have considered my own health and physical condition. I/my doctor know of no reason to be concerned about my participation in this event.**

**Signed:** .....

**Date:** .....