



Name.....

Address.....Emergency Contact Name.....

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Contact Number.....Emergency Contact Number.....

Email Address.....

Date of birth.....

If on a lesson in the water, can you swim 50m with full clothing YES/ NO

Have you suffered any recent injuries or have any medical conditions which could cause danger whilst participating in this activity? YES/ NO

Do you have any allergies which require an EpiPen? YES / NO

If yes to either of the above, please notify your instructor before the course begins.

How did you hear about The Kitesurf Centre? Please circle

Google

Word of mouth

Magazine

Blog

Facebook

Seen on the beach

YouTube

Other

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

Parent or guardian (under 18)

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

By signing this disclaimer, you are agreeing to The Kitesurf Centres Terms and Conditions – (displayed on desk in reception)