

Name.....

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

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

Email Address (please print)

Date of birth.....

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

Do you have any medical condition 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? (if internet search, what did you type in?)

By signing this agreement I am agreeing to The Kitesurf Centres Terms and Conditions (displayed in reception), have disclosed all medical conditions. I will wear an appropriate floatation device when on the water & helmet at all times and follow instructions given by The Kitesurf Centre Team. Although I am covered for 3rd party liability by Bluefin Group, I understand that owing to the nature of the sporting activity The Kitesurf Centre cannot take any liability for personal injury or other damages unless proved negligent. From time to time authorised parties may carry out photography and/or video recording. I agree that The Kitesurf Centre may use such images in promotional, advertising or PR material. I further agree that the copyright rests with the authorised parties. I agree to the GDPR Policy and allow The Kitesurf Centre to contact me with special discounts on lessons, courses and equipment.

All details are stored securely and are not passed to any third parties. We promise not to email you more than 4 times a year, and that they will never be boring!

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

Parent or guardian (under 18)

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

Name.....

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

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Email Address (please print)

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