

## Registration Form

### Welcome to Allerthorpe Lakeland Park

1. I am over 18.
2. I understand, and accept that I am responsible at all times for my and my group's safety. (Risk assessments are available if requested)
3. I and anyone in my group have no medical or other reason that would or should prevent my / our participation in any activity on land or water.
4. I agree that all of my group will always wear suitable footwear and a correctly fitted buoyancy aid when on or in the water. – Buoyancy aids optional in the summer paddling area.
5. I understand that, unless under instruction from Allerthorpe Staff, all under 16's will be supervised at all times by a parent or guardian.

Name: .....

Telephone Number: .....

Signature: .....

Date: .....

Names of Persons under 18 in the group –  
(Continue on a separate sheet if necessary)

### For Marketing Purposes

Please write in the space provided how you have heard about Allerthorpe Lakeland Park.

Brochure  Website  Word of mouth  Advertisements  Other

If other, please specify .....

What is the activity you plan to do? – Sailing  Windsurfing  Paddlesports   
Archery  Mixed  Pedalo

Occasionally we may take photographs to be used for marketing purposes. Please tick the box if you do not wish yourself / your children to be used for such purposes.

Thank you for your time

