Herne Hill Youth Cycling Club

www.hhycc.com

Session Consent form

I, being the parent/carer of the child named below, consent to them taking part in the coached sessions. I understand and agree that they participate under instruction by British Cycling (BC) coaches entirely at their own risk. I have considered the nature of the sessions and have discussed it with them. I am satisfied that they are sufficiently responsible and competent to assume full responsibility for their own safety under the supervision of a BC coach.

Your attention is drawn to the Expectations of Participants and the Club

Medical information: Please inform us of any medical conditions you feel we need to know.

Date:

Childs Name	DOB	Age	Emergency Contact no.	Parent signature	Amount paid	Y/N