|  |  |
| --- | --- |
| **Parent/Guardians Name** |  |
| **Address** |  |
| **Parents Phone:** |  |
| **Parents Email:** |  |
| **Name and Age of Children**  **(Max 2 Packs Available per family)** |  |
| **Programme Waiver:** | I understand that participating in this programme is potentially hazardous, and that my children should not enter and participate unless they are medically able.  In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident which may occur while participating in the programme.  I am also aware of and assume all risks associated with participating in this programme, including but not limited to falls, contact with other participants, effect of weather, traffic, and conditions of the road. I, for myself and my heirs and executors, hereby waive, release and forever discharge the event organizers, sponsors, promoters and each of their agents, representatives, successors and assigns, and all other persons associated with the event, for all my liabilities, claims, actions, or damages that I may have against them arising out of or in any way connected with my participation in this event.  I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise.  I hereby grant full permission to any and all of the above parties to use any photographs, videotapes, motion pictures, website images, recordings or any other record of this event.  I confirm that my children DO NOT have any of the following injuries or medical conditions that would prevent them from taking part in the activities; Spinal Injury, Epilepsy, Fractures, Heart Disease, Muscular Injury, Diabetes. |
| **I accept programme waiver**  **Please tick the box** |  |
| **I understand that Mayo Sports Partnership will contact me weekly by email and whatsapp/text with programme updates** |  |