



# Oaklands Course Application Form

Oaklands Outdoor Education Centre, Capel Garmon Road, Llanrwst, Conwy, North Wales, LL26 0RB

Admin/Course Number:

Please use blocked capital letters

Your full name:

Under 18  
Please tick

Over 18  
Please tick

Course title:

Course date:

From:

To:

## Your address and contact details

Address:

  

Home:

Mobile:

Work:

Postcode

Email address (please print):

## Previous experience, requests or further details relating to your course

  

## Medical Information

Please answer the following as completely as possible:

Please circle

- Are you receiving medical treatment / taking any medication? Yes No
  - If yes please give details:
- Do you have any allergies (e.g. penicillin, sticky plasters, peanuts)? Yes No
  - If yes please give details:
- Any other information/disabilities that may affect your performance during your course? Yes No
  - Please give details:
- Do you have any special dietary requirements? Yes No
  - If yes please give details:
- Have you been inoculated against tetanus within the last 10 years? Yes No
- Are you a confident swimmer (i.e. 25m+ in a swimming pool)? Yes No

## Use of digital photos

During your activities we may take and use digital photos for publicity purposes, including use on the internet. Please indicate whether or not you are happy for us to take and use photos...

Please circle

- I agree to Oaklands/Edsential taking photos Yes No
- I agree to Oaklands/Edsential using appropriate photographs for publicity purposes Yes No

## Emergency Contact Details

Alternative Contact Name:

Home:

Relationship to you:

Mobile/Work:

Name of your Doctor:

Tel:

Doctors address:

NHS Number  
(if known):

Postcode

## Declaration:

I enclose a cheque made payable to the "Edsential" for £50 as a non-refundable deposit (or the full cost of the course if the course cost is less than £50) to secure my place on the above course. I am aware that should I wish to withdraw from the course I must inform the Centre in writing (or email) within 14 days of the course start date or the full course fee will be payable.

I agree to/for my son/daughter to participate in an outdoor and adventurous activity course provided by Oaklands Outdoor Education Centre, part of Edsential. I understand that Edsential is insured in respect of its legal liabilities only, and that there is no Personal Accident Cover (you may wish to arrange your own cover if you consider it necessary).

I agree to/for my son/daughter to receive emergency medical treatment, including anaesthetic, as considered necessary by the medical authorities present.

Signed:

Date:

**If under 18, please have your parent or legal guardian sign this form for you**