



# OMM Parental Consent Form

[for competitors under the age of 16 on the day of the event]

<b>NAME OF EVENT:</b>	<b>DATE OF EVENT:</b>
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<b>PART 1 - CHILD'S DETAILS</b>	
FIRST NAME:	LAST NAME:
DATE OF BIRTH:	
ADDRESS:	
POSTCODE:	
RELEVANT MEDICAL INFORMATION [e.g. any conditions requiring, treatment, medications, allergies etc.]	
ANY OTHER RELEVANT INFORMATION:	

<b>PART 2 - PARENT/GUARDIAN DETAILS [responsible, permitted adult for the event]</b>	
NAME:	RELATIONSHIP TO CHILD:
MOBILE NUMBER:	
ALTERNATIVE EMERGENCY CONTACT NAME/NUMBER:	

<b>PART 3 - PARENTAL/LEGAL GUARDIAN CONSENT</b>	
(1) I consent to my child, whose details are set out in Part 1, taking part in the specified OMM Event	
(2) I understand that OMM Events are held in accordance with both the rules and safety requirements laid out on the website.	
(3) I accept the hazards involved in OMM Events and acknowledge that my child takes part in these activities at my risk. Although the organisers take primary responsibility for the safety of children in these activities, I confirm that I understand that they accept no liability to me for any loss or damage to my child or our property arising out of his/her participation, other than the organiser's liability for causing death or personal injury by negligence.	
(4) In the event of any illness/accident during these activities, I consent to any necessary medical treatment being administered to my child, including anaesthetics.	
(5) I confirm that I/the person competing with my child, have the relevant experience to make safe decisions on the hill whilst completing the event.	
<b>SIGNATURE [parent or legal guardian]:</b>	
NAME:	DATE:
CONTACT NUMBER:	