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## Cycle Club Application and Consent Form

### To the Parents:

For the children's own safety, we must ask that the following conditions are met. By signing this Consent Form, you are agreeing to conform to these requirements:

1. It is your responsibility to provide a safe bicycle that is suitable for your child.
2. Every child must wear a correctly fitting helmet at each session. Haddenham Cycle Training's instructors will not be held liable for the results of any injury which it is later established may have been caused by the wearing of an incorrectly fitted or maintained helmet.
3. Children should wear clothing suitable for the time of year and weather conditions, e.g.: shorts or tracksuit trousers, trainers / enclosed shoes, waterproof coat when wet, or sun protection lotion when hot.
4. Children are expected to behave appropriately and listen to instruction. Instructors may at any time refuse to train your child if his / her behaviour is deemed to be unsuitable or if he / she feels they are not ready / safe to ride on the road.
5. **Paid or voluntary instructors working as part of Haddenham Cycle Training cannot be held responsible for any injury, or any loss or damage to property, which is not caused by an instructor's negligence. Bicycles and helmets are taken to Cycle Club at your own risk.**



## Haddenham Cycle Club Application Form



FULL NAME OF APPLICANT MEMBER .....

Date of Birth: ..... Age at Date of Joining: .....

Phone number(s) where you can be contacted while your child is at the Club:

Home Phone: ..... Mobile Phone: .....

E-mail Address: .....

*Please describe below any physical or medical condition that may affect your child's participation in Cycle Club and tell us about any medication that he/she is taking in relation to that condition. Please include details of any conditions or limitations that we should be aware of (e.g. colour blindness, poor co-ordination or lack of spatial awareness, limited attention span etc. Please also include any allergies. Thank you.*

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I enclose a joining fee of £1 (Cash or Cheque payable to Haddenham Cycle Training)

I agree to pay £1 per child per session attended

I would be willing to help at Cycle Club as a Volunteer

I agree to the above requirements

Signed (Parent): ..... Date: .....

Please Print Parent's Name: .....

**Please return in advance to Haddenham Cycle Training c/o 7 Dovecote, Haddenham, HP17 8BP or bring with you to Cycle Club. Thank you**