PERMISSION FORM

I AGREE THAT	(NAME)
MAY TAKE PART IN THE HIGH ROPES A	CTIVITY TO BE HELD AT SKREENS PARK
understand that this is an adventurous activity. A obstacles and may sustain small grazes bumps a ow level assault course. They will be wearing ha ncluding a continuous belay system which attack by signing below I consent to my child taking part in the activities name an be physically demanding and include inherent risks. Whilst every profortunately accidents may occasionally occur.	and bruises, the same as you would expect on any rnesses, helmets and full safety equipment nes them to the course. Ind. I indicate that I understand that adventure and challenge activities
My child has the following medical cor	nditions that may affect this activity
Emergency contact number	
SIGNED	DATED