

# P600 Mountaineering

## Event Participant Medical & Risk Declaration Form

Any information provided on this form will be handled in strictest confidence, and used by P600 Mountaineering only in exceptional circumstances to discharge our responsibilities in the event of an incident.

\* Required

### Participant Information

1. Full Name \*

2. Address \*

3. Postcode \*

4. Email Address \*

5. Phone Number \*

6. Date of Birth \*

7. Name of Parent/Guardian (if under 18)

All under 18's must be accompanied by their legal parent or guardian throughout the activity.

8. Date of your event with P600 Mountaineering \*

Where events take place over multiple days, enter the first date of attendance. If anything changes after the first day, please complete another form and notify a member of P600 Mountaineering Course Staff

## Emergency Contact

9. Emergency Contact Name \*

10. Emergency Contact Relationship \*

11. Emergency Contact Phone Number \*

12. Alternate Emergency Contact Name, Relationship & Phone Number

## Medical Declaration

Please disclose any current or past medical conditions that may affect your ability to safely participate in this mountaineering activity.

Disclosure will **not automatically prevent participation**, but failure to disclose relevant information may increase the risk of injury to yourself or others. All information will be treated confidentially and used solely to ensure your safety and wellbeing during the activity.

13. Do you have any pre-existing medical conditions? \*

(tick all that apply)

- None
- Allergic reactions (e.g., food, insect stings, medication)
- Anxiety, depression, or other mental health conditions
- Any condition affecting balance or coordination
- Asthma or other respiratory conditions
- Blood disorders (e.g., haemophilia)
- Diabetes (Type 1 or Type 2)
- Epilepsy or seizures
- Fainting or dizziness
- Heart conditions (e.g., angina, arrhythmia)
- High or low blood pressure
- Joint or muscular problems (e.g., arthritis, back pain)
- Neurodiversity (e.g., ADHD, Autism, Dyspraxia)
- Phobias or Fears (e.g., Heights, Water, Animals)
- Visual or hearing impairments
- Other

14. If you selected any of the above conditions, please describe the issue in more detail

What triggers the issue? What challenges might it present? How should we support you? Anything else we should be aware of?

⋮

15. If you have declared a medical condition, please confirm you have consulted a doctor regarding your suitability for this activity? \*

(P600 Mountaineering cannot be responsible for illness or injury arising from participation without or against the advice of a medical professional)

- Yes
- No

16. Are you currently taking any medication?

Over-the-counter, prescription or recreational substances

17. Do you carry any emergency medication (e.g., inhaler, insulin, EpiPen)?

At the start of each session, you must inform the staff member of any medication you are currently taking.  
Please also indicate **where this medication is kept**, in case staff need to assist you in administering it during the activity.  
This ensures we can respond quickly and appropriately in the event of a medical situation.

18. Have you had any serious injuries in the past 5 years?

19. Are you currently pregnant, or do you believe you might be pregnant? \*

If yes, please confirm whether a qualified health professional (e.g., GP, Midwife, or Obstetrician) has declared you fit to participate in physical activities

Yes

No

## Risk Acknowledgement

20. I understand that mountaineering and outdoor activities involve inherent risks including personal injury, and in very rare cases death. I accept these risks and agree to follow all safety instructions provided by the instructors. \*

Yes

21. I consider myself physically fit to take part in strenuous outdoor activity. \*

Yes

## Consent & Agreement

22. I confirm that the information provided is accurate and complete. \*

Yes

23. I agree to inform the organiser of any changes to my health before the activity. \*

Yes

24. I consent to emergency medical treatment if required. \*

Yes

No

25. I have read and understood the Terms & Conditions. \*

Yes

26. I consent/do not consent to photos/videos being used for marketing purposes by P600 Mountaineering. \*

Consent

Do not consent

---

This content is neither created nor endorsed by Microsoft. The data you submit will be sent to the form owner.

 Microsoft Forms