

APPENDIX 2: DISCLAIMER AND PERSONAL DETAILS

Please print your details clearly, complete in full and return to your Group Leader.

Full Name:

Address:

Postcode:

Telephone No. (including STD code):

Email:

Next of kin (or person to contact in case of accident/illness):

Next of kin contact telephone number:

Address of next of kin (if different from your own):

Postcode:

How did you find out about the group?

What would you like to get out of the group?

To get fitter To lose weight To run local events To improve To meet new running partners

Other:

Are you currently involved in any other form/s of exercise? Yes No

If YES, what type and how often?

Have you done any running before? Yes No

If YES, what type and how often?

Do you have any health considerations we ought to know about? Yes No

If YES, please explain:

Do you suffer from any of the following: Diabetes Heart problems Joint problems

High blood pressure Asthma Back pain Previous injuries

Any condition requiring medication:

Other (please detail)

PLEASE READ THE FOLLOWING AND SIGN BELOW:

Running Group Leaders are qualified leaders and are willing to share their experience and enjoyment of the sport with me. I confirm that I understand that participation in this group is entirely at my own risk and should consult my own doctor if suffering from any condition that might make running injurious to my health.

For Buggy Runners: I understand that I am joining a buggy running group at my own risk and accept full responsibility for the health & safety of the infant(s) and any equipment I attend with.

Signed:

Date: