

MEDICAL DECLARATION FOR THOSE USING THE POWERFAN™

PART 1 – ACKNOWLEDGEMENT OF RISK

1. I declare that to the best of my knowledge I do not have a medical condition which might increase the chance that I am involved in an accident, resulting in injury to myself or others, e.g. heart condition, epilepsy etc. I further declare that to the best of my knowledge I am not pregnant.

2. I understand that the use of the POWERFAN™ can be physically and emotionally challenging. I accept that there is a risk of minor injury when undertaking such activities.

3. I understand that for safety reasons, the maximum weight for an individual on the POWERFAN™ is 120kg (19 stone)

Name	Signature	Date
1.		
2.		
3.		
4.		
5.		

PART 2 – CONSENT FOR UNDER 16's USING THE POWERFAN™

1. I (print name)consent to allow the child(ren) listed below to participate on the POWERFAN™

2. I declare that if I am not the parent or guardian of the child(ren) I have authority from the child(ren)'s parent or guardian to sign this consent form

Participating child(ren's) name	Age	Participating child(ren's) name	Age
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

Consenting adult name	Consenting adult signature	Date