Kayak Wild Islay Fat-Biking Booking Form Please complete and return to confirm your booking



Name;			
Address;			
Country or Postcode;			
Mobile;			
Email Address;			
Holiday location when on Islay;			
Emergency contact;			
Emergency contact number;			
Group details; Please list each name, age & size		Size	Age
An idea of clothing size helps bring the right equipment	b/i/e		
Experience level; (delete as appropriate)	b/i/e		
Beginner/Intermediate/Experienced – <i>b/i/e</i>	5/1/2		
Under 18's must be accompanied by an adult.	b/i/e		
	b/i/e		
Please sign this box to confirm that each of the above person(s) have read and agree to the terms and conditions, and are medically fit to take part in outdoor adventure activities			
I			
Activity Date (try to be flexible to allow for the weather!)			
Activity Date (try to be flexible to allow for the weather!) Aim of activity	Taster / wildlife / adventure / beach ride / evenin	ig ride /	3
Aim of activity	distilleries pathway		
Aim of activity Half Day session	distilleries pathway	n 2pm to	
Aim of activity Half Day session Other times can be arranged by prior arrangement. Limited to 4 people only £50/person Half day Full day by arrangement only Payment can be made by cash, cheque, bank transfer or PayPal (please add 3.5% fees – add 5% for international payments)	distilleries pathway Half day – Morning 9:30 to 12;30pm or Afternoo Package includes Fat bike, helmet, gloves & water bot In addition you need to bring: • Waterproof jacket • Fleece top • boots or trainers that you don't mind getting w Optional (depending on the weather):	n 2pm to	o 5pm
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Terms & Conditions

We have taken all reasonable steps to provide you with the level of care and assurances of safety appropriate to these activities. However you should be aware that certain inherent risks remain which are integral to the activity, and which cannot be eliminated without destroying the unique character of the activity.

Amongst these things, some of these risks can contribute to:

- The loss or damage of your personal clothing or equipment,
- Feeling of discomfort, fear and apprehension, or even accidental injury, illness or trauma.

The level of real (as apposed to apparent) risk associated with the activities of Kayak Wild Islay is very low. However the type of risks may be something with which you are not familiar.

Kayak Wild Islay has clear obligations and responsibilities and we take those very seriously. However, we will be expecting clients to contribute to their own and each other's safety by following the instructions we will, from time to time, be giving you.

Acknowledgement

I recognise and confirm:

- That this course, programme or event may require an attitude and approach different from other activities I have been involved with,
- That the nature of the risks may be different to those which I am familiar with and that certain risks remain,
- That Kayak Wild Islay may use photographs taken during the course of the activities for promotional purposes. When a parent does not agree to their child being photographed, the guide must be informed and we will make every effort to comply sensitively.
- o If ticked Kayak Wild Islay may **not** use photographs for promotional purposes

Confidential Health Questionnaire

We are requesting this information to help us provide for better first aid and emergency medical care should that be necessary. This information is confidential otherwise. If your health changes please let the guide know.

Are you receiving any medical treatment at present or had an operation or any past condition we should be made aware of? If so, please give details YES / NO

Do you suffer from any of the following; Diabetes, Asthma, Epilepsy, Allergies, Hay fever or any other condition that you feel we should be made aware of? If yes, please give details YES / NO

(let the guide know if you will be carrying medication or an inhaler at the start of the session)

Declaration

I understand that I will be involved in an activity that requires physical effort and that I need to have a reasonable level of fitness in order to participate. I undertake to inform the guide in charge of the activity in the event of any changes in my health prior to and during the activity.

I hereby certify that the above information is, to the best of my knowledge, true and correct.

Signed	Date	