



OUTDOOR PURSUITS BOOKING FORM

Group Name: _____

Organisers Name: _____

Preferred Date of Activities: _____

Please tick activities that you wish to participate in:

- | | | | |
|---------------|--------------------------|------------|--------------------------|
| Archery | <input type="checkbox"/> | Yachting | <input type="checkbox"/> |
| Waka Ama | <input type="checkbox"/> | Kayaking | <input type="checkbox"/> |
| Teambuilding | <input type="checkbox"/> | High Ropes | <input type="checkbox"/> |
| Raft building | <input type="checkbox"/> | Low Ropes | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | | |

If other, please state what activities you wish to participate in and the outcomes you would like to achieve:

Acknowledgement of Risk:

The activities listed contain some element of risk. Each programme has been carefully analysed for risks and operating procedures have been put in place for each programme, including the risk to participants. It should be realized that because of the nature of the activities and the outdoor environment in which they take place, that the risk can never be reduced to zero. I have read and understand the information and I acknowledge and accept that part/or parts of these programmes may be physically or emotionally demanding and that there is an inherent risk of injury. I also agree to pay the deposit required to confirm this booking.

Sign: _____ Date: _____