

Robert Jeffery Centre

PARTICIPANTS MEDICAL FORM

Full Name: _____ Date of Birth: _____

Please complete fully and honestly. All information will be held in confidence and used to your benefit by ensuring we are prepared for potential problems through prior knowledge. If any information given on your form has changed, please inform us upon arrival.

Please tick "Yes" or "No" to each question, giving all relevant details if "Yes" :

HAVE YOU EVER HAD (Circle specific condition)	YES	NO	IF "YES", EXPLAIN	
Heart trouble; high or low blood pressure?				
Asthma; bronchitis; tuberculosis?				
Diabetes; haemophilia?				
Epilepsy; fainting; migraines; severe head injury?				
Nervous illness; stress; panic attacks?				
Hay fever; allergies, e.g. medicines, insect bites, food?				
History of repeated fractures; tendon or ligament damage, e.g. back, neck, ankles, knees?				
Do you suffer from, or carry, an infectious disease?				
Do you have any special dietary requirements?				
Can you swim? Circle how far.			Less than 50m	50m or more
Do you have a disability?				
Are you taking any medication?				
Do you have any other conditions which may be important? Give details ...				
Have you had a recent tetanus booster injection? Please give date.				

PERSONAL DETAILS :

Date of Birth	
Address	
Tel. No.	

DOCTOR'S DETAILS

Name	
Address	
Tel. No.	

EMERGENCY CONTACT DETAILS FOR NEXT OF KIN:

Name	
Address	
Tel. No.	

Name	
Address	
Tel. No.	

In the event of an emergency every effort will be made to contact parents/guardians/next of kin as soon as possible. To ensure that people receive treatment quickly, the following declaration is included. Please delete items marked * if you **do not** agree to them.

Declaration: I declare that the information provided is correct and that nothing has been withheld. If considered necessary by medical authorities, I agree to receiving a) emergency medical treatment*, b) anaesthetics* c) a blood transfusion*. (*delete if necessary)

(N.B. If the participant is under 18, this form should be signed by a Parent/Legal Guardian. In such a case, will the person signing this form please complete the supplementary line to identify him or herself.)

SIGNED	
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DATE	
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NAME	
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STATUS (parent/guardian)	
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If you are in any doubt about your physical ability, or that of your child, to attend the Centre, please call us to discuss any worries. If necessary speak to your doctor or ask them to complete the next section or write a note to say what problems need to be taken into account.

DOCTOR - In my opinion, there is no medical reason why it would be unsuitable or unwise for the above named participant to attend a course at the Robert Jeffery Centre.			
SIGNED		DATE	

Robert Jeffery Centre

Participant Clothing/Kit List

The Centre has extensive stores and will provide all necessary specialist equipment. This includes waterproof jacket & trousers, small rucksack, walking boots and Wellingtons. **There is no need to purchase any specialist items**, however, should you have your own equipment, feel free to bring it. Please remember that clothing used on our courses may/will get wet and dirty so older things are preferable.

The following items are suggested as the minimum for your course.

- 2 sets of clothes and shoes to travel in (*also for indoor wear at Centre*)
- Sleeping bag
- Pyjamas or bed clothes
- 2 Towels (*one for swimming*)
- Wash kit
- Lunchbox and drink container (**Don't forget a packed lunch on your first day!**)
- Swimming costume/kit
- Reading Book
- Torch and spare batteries (**only** if you have one)
- Old trainers or shoes
- Jacket /Coat
- 3-pairs trousers (not jeans – tracksuit / jogging bottoms ideal)
- Warm hat and gloves (2 Pairs in winter)
- 4-Tee shirts
- 4-sweaters/sweatshirts/fleece tops
- Underwear (*enough for several changes*)
- 5-pairs socks (*Trainer socks are not suitable for activities*)
- Thermal Underwear (*winter*)
- Personal medications (*as appropriate*)
- Suntan Lotion / After sun Lotion (*summer*)
- Sun Hat/Cap (*summer*)
- 3 Black Bin Bags
- Spending Money (Check with school how much to bring)

We recommend that all belongings are marked or labelled with the owner's name.

Luggage should be packed into one bag or suitcase. Sleeping bags may be separate and should be in a labelled. Please compress the sleeping bag to as small a size as possible as this helps when loading into transport.

Seasonal variation

The kit list is a standard basic minimum. Courses during the colder part of the year would be advised to put in extra warm clothing, extra gloves etc. In warmer spells, shorts and more T shirts may be appropriate rather than lots of sweaters.

Electrical Items

Items such as mobile phones, MP3 players and electronic games etc have caused problems with children in the past. There are limited facilities for recharging and we recommend they are best left at home.

All electrical items brought should be in good working order and fitted with moulded plugs.