

PARENTAL CONSENT FORM

STUDENT/CHILD EMERGENCY AND CONSENT FORM

According to article 56, paragraph 4, Croatian Law of offering services in tourism NN 68/2007 from 15.06.2007. for minors (under age 18) parents or guardians must sign parental permission to participate in rafting on Cetina river.

1.PARTICIPANT AND PARENTAL INFORMATION

Child's Name:	
Date of Birth:	
Parent/Guardian's Name:	
Address:	
Emergency Contact Number:	
Email Address:	

Child's Medical Information (Please complete all sections)	Yes	No
Epi Pen		
Asthma		
Allergies		
Medical Alert Bracelet		
Does your child have a disability?		
Does your child have any medical conditions of which we should be aware? (Please consult your GP/Medical Practitioner for guidance and advice where necessary)		
If you have answered 'YES' to any of the above questions, please give further details including any treatments (e.g. asthma pump, epi pen):		

2.PARENTAL CONSENT AND SAFETY & RISK DECLARATION

	Yes	No
I have considered and understand the nature of the activities offered by Plamen Bauk d.o.o. / Dalmatia Getaway Outdoors, both water based, and land-based activities and I accept that these activities can expose participants to many risks and can cause physical injury. I have discussed participating in these activities with my child (as named above) and I give my consent for my child to take part in these activities.		
I have read and understood the Safety instructions for White Water Rafting provided on a website dalmatiagetaway.com (subpage Rafting Safety and Insurance) and I have discussed these with my child and I am satisfied that my child is sufficiently competent to understand these requirements and the importance of abiding by the rules.		

I accept and have impressed upon my child that the raft guide will only be able to assist my child if they follow their instructions carefully and that acting outside the raft guide's advice may cause my child or a third-party problems or injuries.		
My child is sufficiently fit and able to raft even in difficult conditions requiring physical exertion in strong currents and able to participate in all the activities.		
My child is confident in moving water with a buoyancy aid.		
I have listed above all my child's medical conditions and treatments which are relevant to the activity.		
In the event of an incident or accident involving my child, I agree to my child receiving first aid from a suitably qualified person and/or any medical or dental treatment, including but not without limitation to anesthetic and blood transfusion, which may be considered necessary by a registered medical practitioner.		

3.CONDITIONS OF USE

<p>I acknowledge and accept that the Plamen Bauk d.o.o. / Dalmatia Getaway Outdoors shall not be liable for:</p> <ul style="list-style-type: none"> - any damage or loss of any property or items belonging to my child, group, or any third parties - personal injury or death to my child, group, or any third parties (but only so far as such injury or death is not caused by the Authority's negligence).
<p>I accept and have impressed upon my child that they must comply always fully and promptly with all the safety regulations and instructions issued by the Plamen Bauk d.o.o. / Dalmatia Getaway Outdoors, our staff and / or our instructors.</p> <p>In participating in an outdoor activity my child agrees to follow the directions and orders of any member of the Plamen Bauk d.o.o. / Dalmatia Getaway Outdoors staff and I have explained this to my child. The Authority reserves the right to terminate the stay/use of its facilities by any person(s) whom it reasonably considers is in breach of these conditions. Such persons may be required to leave tour immediately. The Authority will not accept liability for any expenses, claims, losses or costs incurred because of such termination.</p> <p>I accept and have impressed upon my child that they must not do anything (or omit to do anything) which may cause damage or loss to Authority property or facilities, to other Participants or cause nuisance, annoyance, disturbance, inconvenience or injury to any other persons or third parties on the premises.</p>

I have read and accept the Conditions of Use as set out in Section 3. above and where so indicated give my consent and or declare as stated within Section 1. and Section 2. above.

SIGNATURE: _____

NAME: _____

DATE: _____