

# Walkabout Wrexham and District

## Walk Register

Day and Date of Walk \_\_\_\_\_ Start Time \_\_\_\_\_

Location of Walk: \_\_\_\_\_

Walk Leader(s): \_\_\_\_\_

Back-up Leader(s): \_\_\_\_\_

Notes \_\_\_\_\_

\_\_\_\_\_

Total Number of Walkers (including Leaders)		Total Number of <u>New</u> Walkers	
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**Health**

- I confirm I have read the 'Guidance for New Walkers'.
- Please inform the walk leader(s) of any health conditions you have and/or any medication you are carrying that they should know about.
- Please ensure you are carrying an ICE card and that the details on it are up to date.
- I understand that I take part in this walk at my own risk and I will seek medical advice if appropriate.

Walk Leaders should also enter their details on this register.

	Walker's Forename <small>(Please Print)</small>	Walker's Surname <small>(Please print)</small>	New?	Photo Consent?
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

**Confidentiality**

- Information collected on this form is retained for 12 months for insurance purposes.
- Walkabout Wrexham and District will not pass on your personal details to anyone else.

**Health**

- I confirm I have read the 'Guidance for New Walkers'.
- Please inform the walk leader(s) of any health conditions you have and/or any medication you are carrying that they should know about.
- Please ensure you are carrying an ICE card and that the details on it are up to date.
- I understand that I take part in this walk at my own risk and I will seek medical advice if appropriate.

	Walker's Forename (Please Print)	Walker's Surname (Please print)	New?	Photo Consent?
16				
17				
18				
19				
20				
21				
22				
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(Edited October 2018)