



PARTICIPANT CONSENT FORM

Altitude Parks Acton Limited (t/a Oxygen FreeJumping)

Consent for a Participant to take part in trampolining activities at Oxygen FreeJumping.
This form must be completed in **BLOCK CAPITALS**.

PARTICIPANT'S DETAILS

First Name		Surname			
Date of Birth		Age		Male / Female	
Address					
		Post Code			
E-mail		Telephone			

PARENT OR GUARDIAN DETAILS (IF PARTICIPANT UNDER 16)

(If you do not have parental responsibility for the Participant, you cannot use this form.)

First Name		Surname			
Date of Birth		Age		Male / Female	
Address					
		Post Code			
E-mail		Telephone			

HEALTH

Does the Participant suffer from any illnesses/injuries/allergies/medical conditions* (please list)

Is the Participant on any medication? (please state medication and reasons)

* Please supply any additional information on conditions which may require extra consideration by Oxygen Free Jumping staff.

CONSENT (ALSO SIGNED BY PARENT OR GUARDIAN IF PARTICIPANT UNDER 16)

I consent to take part/the under 16 named above taking part in activities at Oxygen Free Jumping. In providing my consent I declare that I understand that trampolining activities themselves are not completely free from risk. I accept that whilst Oxygen Free Jumping staff will take the appropriate precautions to prevent accidents, this can never be guaranteed.

I confirm that I am/the under 16 named above is physically fit and healthy and I undertake to advise Oxygen Free Jumping of any change in this regard. I have completed the 'Health' section above and give consent that in the event of any illness/accident any necessary treatment can be administered to me/the under 16 named above. I confirm that I have read through the Activity Rules/with the under 16 named above and that I/he/she agree(s) to abide by the Activity Rules as laid out by Oxygen Free Jumping and to follow the instructions of the Oxygen Free Jumping staff at all times.

I declare that the above information is correct and if any information changes I will notify Oxygen Free Jumping.

Participant Name:

Signed by Participant: Date:

(if Participant under 16) Parent / Guardian Name:

(if Participant under 16) also signed by Parent /Guardian: Date:



All users agree that they shall not participate in any activities provided by Oxygen Freejumping unless they have undertaken Oxygen Freejumping's safety and induction procedures and processes in relation to the activities and confirm that they will comply with these rules at all times whilst on the premises. The rules are as follows:

1. I will comply with the height, weight and age restrictions specified by Oxygen Freejumping. The current weight limit for any clothed participant is 21 stone.
2. Participants will at all times wear any protective equipment, such as jumping socks, on the trampolines
3. Prior to participating, users will remove jewellery, mobile phones and other valuables
4. Participants will not eat or drink whilst participating in activities provided by Oxygen Freejumping
5. Participants will at all times only carry out activities that are within their skill level and of which they are able to retain control at all times
6. Participants will at all times follow the instruction Oxygen Freejumping staff
7. Participants will not attempt to wrestle on trampolines or jump on the same trampoline as another user
8. Participants will not attempt to climb or dismantle the safety apparatus, including netting and padding, throughout the park
9. Participants will always seek to bounce and land on either their current or immediately adjacent trampoline
10. Participants will only rest in the designated seating and rest areas of the activity arena
11. Participants will not utilise the designated performance trampolines unless participating in activities led by an Oxygen Freejumping Oxygen Coach
12. Participants confirm that they are not pregnant. You should not participate if pregnant
13. Participants confirm that if they have any sort of medical condition that they believe may affect their ability to safely jump on a trampoline they must consult a qualified medical practitioner before participating