



Adult Cycle Training

Pre-course Assessment Form

<p>Name:</p> <p>Address:</p> <p>Telephone Number:</p> <p>Email address:</p> <p>Date of birth: (dd/mm/yyyy)</p>

What is your main motivation for taking part in the training?

- For all round health improvement
- To save money
- Learn a new skill
- Environmental concerns
- Workplace incentive to cycle
- Leisure purposes (to cycle with family or friends)

What level of training do you require (this can be confirmed at your first session if you are unsure)?

- Never cycled before (L1)
- Beginner off-road (L1)
- Returning to cycling (L2)
- Beginner on road (L2)
- Advanced on road (L3)
- Route planning

Please give a brief description in your own words of your cycling experience to date and the skills you are hoping to develop through this training:

Preferred location for training (e.g. Orton, Werrington, Hampton)?

Preferred time (e.g. 10am – 12pm)

Do you need to borrow a bicycle?

- Yes**
- No**

If you do not own your own bike or cannot borrow a bike from friend/family please telephone or email us for a loan bike. *Please note a deposit may be required.*

Health Screening

The following questions have been designed to identify the small number of people for whom it would be wise to have medical advice before starting.

Has your doctor ever said you have a heart condition?

- Yes**
- No**

Do you feel pain in your chest when you do physical activity?

- Yes**
- No**

Do you ever lose balance because of dizziness or ever lose consciousness?

- Yes**
- No**

In the past month, have you had pain in your chest when you were NOT doing physical activity?

- Yes**
- No**

Do you have a bone or joint problem that could be made worse by a change in your physical activity?

- Yes**
- No**

If you answer yes to any of the above questions, we recommend you seek medical advice before starting your cycle training. **By signing the cycle training consent form you acknowledge that you undertake cycle training at your own risk.**

Please read and agree to the Travelchoice consent form:

I agree to the following points of information and I will take lessons in safe, effective cycling.

Except in cases where Travelchoice supplies the bicycle I ride I understand that:

1. The instructor(s) may refuse to train trainees if they decide their bike is unroadworthy. Their decision is final. Not being able to commence and/or continue with a training session due to having an unroadworthy bike will not entitle trainees to a refund.
2. It remains the trainees responsibility not to ride an unroadworthy bike. If in doubt as to whether a bike is road worthy I should seek the advice of a professional mechanic.
3. Travelchoice trainers will not carry out repairs to make an unroadworthy bike roadworthy.
4. It is the trainees responsibility to ensure that my bicycle is roadworthy before attending the training session.
5. I accept that the instructors may at any time refuse to continue training if my behaviour or ability level is deemed to be unsuitable.
6. Travelchoice will not be held responsible for any injury or loss or damage to any property which is not caused by an instructor's negligence. Travelchoice takes no responsibility whatsoever for any injury, any loss or damage to any property which occurs either on the way to or from a lesson or subsequent to lessons.
7. Having taken training does not necessarily means that it is safe for me to ride a bicycle. To become proficient takes much more practice than lessons of this kind can provide.
8. Travelchoice leaves the decision about wearing a cycle helmet entirely up to the trainee. The decision to wear a helmet is a personal one. Travelchoice will not be held liable for the results of any injury which is later established, may have been prevented by the wearing of a helmet. If a helmet is worn Travelchoice will not be held liable for the results of any injury which it is later established may have been caused by the wearing of the helmet. The instructor will advise me only on the fit of the helmet but will not necessarily be able to judge from its appearance if it is in good condition.
9. Trainees must make the instructors aware of any medical condition I have which may adversely affect the training.
10. Personal details held by Travelchoice may be given to the organisation that is in whole or in part paying for my lesson and that the organisation may contact me to ask for details of the lesson.
11. It may be necessary to take photographs of those undertaking cycle training, which may be used for publicity purposes.
12. Instructors are not at liberty to amend the terms of this consent form.

I understand this consent form must be completed and signed before a training session commences and that a training session cannot take place if this consent form is not signed.

This consent form applies to any training organised by Travelchoice. I understand a new consent form need only be signed for any sessions that occur after the terms vary.

I understand that if I have answered 'Yes' to one or more health screening questions, I should seek medical advice before attending a cycle session. I agree to tell the instructor if there is a change in my

medical condition. I understand that this information will be shared with other cycle instructors and that I cycle at my own risk.

I have agreed to the Travelchoice consent form

Signed:

Date: