



SAFE STEPS: SALISBURY PLAIN DISCLAIMER AND EMERGENCY CONTACT DETAILS

I _____ accept I participate in this walk at my own risk and that The HALO Trust will not be liable for any loss, damage, action, claim, cost or expense which I suffer or incur as a result of participating in this walk except where this is caused by The HALO Trust's negligence.

If I have any health problems or am unsure about my physical ability to take part in this walk I will obtain advice from a doctor before participating.

I will abide by all rules and regulations that apply to this walk, including but not limited to those which are displayed, or are given to me, at the event.

All information provided will be used solely for the purposes of administering the walk and will be managed in compliance with the Data Protection Act 1998.

Please tick

Signed _____

Dated _____

EMERGENCY CONTACT INFORMATION

Emergency contact name: _____

Relationship to participant:: _____

Telephone Number: _____ Email _____

Please return this completed form by email to events@halotrust.org or by post to: Safe Steps, The HALO Trust, The Granary, Phillips Lane, Stratford-sub-Castle, Salisbury, Wiltshire SP1 3YR.