



Health & Fitness

CARD ID	:
ISSUED Y/N	:
INDUCTION COMPLETED BY:	

PARENTAL CONSENT

I being the parent /guardian ofunderstand and agree that my son /daughter participates in the zest Junior Gym Club, under the instruction of a qualified coach, entirely at his /her own risk. I have considered the nature of such sessions and have discussed them with my son /daughter. I am satisfied that my son /daughter is sufficiently responsible and competent to assume full and entire responsibility for his /her own safety.

Signed..... Date / /20

(Any children who persistently misbehave or put others in danger will be asked to leave the sessions and will not be allowed to attend in future)

Child Information / Medical History

All information is confidential and only seen by relevant staff

Name..... Age.....

Address.....
.....

Has your child any of the following? –

	No	Yes	Comments if answered Yes
Ear infection, hearing defect or hearing aid			
*Asthma			
Bronchitis			
Frequent headaches			
Back trouble of any type			
Diabetes			
Epilepsy			
Physical disabilities			
Eye trouble/ visual impairment			
Hernia or rupture			
Any other illness or medical condition that the instructors need be aware of			

- *If your child uses an inhaler please ensure that
- a) they bring it with them to each session
 - b) They can use it themselves
 - c) It is labelled with their name

I hereby certify that to the best of our knowledge the above statements are correct

Signed..... Date / /