*This form must be filled in electronically. We cannot accept hand written/typed & scanned forms*

**Section 1 – Personal Details**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full Name |  | | | | | |
| Address |  | | | | | |
| Postcode |  | | | | | |
| Date of Birth |  | | | | | |
| Phone |  | | | | | |
| Email address |  | | | | | |
| Can we take and use photos of you in promotional material including website, social media platforms and printed media? | | Yes |  | No |  |

**Payment Details**

We are able invoice your organisation directly

If you would like your organisation to be invoiced, please can you provide the following details for the person/ organisation paying, if different from above

* Name
* Contact number
* Email address
* Full postal address

If you are self-funded you can pay by bank transfer.

**Account Name** : KCC Kent High Weald Partnership (some banks will only accept Kent County Council as the account name)

**Sort code:** 60-60-08

**Account No:** 56486073

**Payment reference:** L3 H247 KHWP OCN

*If you are unable to pay via bank transfer we can send you an Eventbrite link for payment*

*This form must be filled in electronically. We cannot accept hand written/typed & scanned forms*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Medical Information** | | | | | | | | |
| Full Name: |  | | | | | | | |
| Date of Birth: |  | | | | | | | |
| Gender: |  | | | | | | | |
| **Condition** | | **Comment** | | | | **Medication needed?** | | |
| Sight/hearing difficulties | |  | | | |  | | |
| Asthma/Bronchitis | |  | | | |  | | |
| Heart condition | |  | | | |  | | |
| Diabetes | |  | | | |  | | |
| Epilepsy | |  | | | |  | | |
| Allergies: e.g. pollen, nuts, materials, stings bites | |  | | | |  | | |
| Date of last Tetanus injection (optional) | |  | | | |  | | |
| Are you taking any medication? | | | Yes |  |  | No |  |  |
| If yes, please give details | | | | | | | | |
| Is there anything else we should know? | | | | | | | | |

|  |  |  |
| --- | --- | --- |
| **GP Details** | | |
| Name: | Full Surgery Address: | Phone Number: |

|  |  |  |
| --- | --- | --- |
| **Emergency Contact 1** | | |
| Name: | Relationship to you: | Phone Number: |

|  |  |  |
| --- | --- | --- |
| **Emergency Contact 2** | | |
| Name: | Relationship to you: | Phone Number: |

…………………………………………………………….. (please print name)

* Declare that the information I have given is true and correct
* Agree to medical treatment issued by a qualified First Aider if necessary
* Believe myself to be in good enough physical and mental health to undertake all aspects of this course

|  |  |
| --- | --- |
| Signature |  |
| Print Name |  |
| Date |  |

Your details will be kept on a secure server for the duration of the course and deleted once you have received your certificate.

**Training Booking Terms & Conditions 2023**

This information should be read before booking any course. Upon completion submission and acceptance in writing of the booking form the clients named on the booking form will have entered into a binding contract on the basis of the following terms and conditions. Please contact us if you have any questions.

KHWP are Kent High Weald Partnership a Not for Profit Countryside Management Partnership hosted by Kent County Council

**1. Agreement**

Any agreement based on the outline terms and conditions arises upon the fulfilment of the following:

1. Receipt & clearance in Kent County Council bank account or Eventbrite account of full payment and a fully completed booking form, a fully completed medical information questionnaire and acceptance by KHWP in writing.
2. That the signature or inclusion of name on the booking form is taken as the client attending the course or by a legally recognised agent of the client for and on their behalf. This agreement is governed by English Law.
3. The agreement is between KHWP and the client(s) on the booking form and is the sole agreement between those parties.
4. KHWP reserves the right to refuse bookings to any party or individual without the need to give reasons solely at KHWP discretion and we will return any payment accompanying the booking form.

**2. Payment**

1. By bank transfer
2. By purchase card via Eventbrite
3. By invoice/purchase order.
4. Full payment is due at least 30 days before the course start date.

**3. Prices**

1. Whilst every effort is made to limit prices to those given on the booking form KHWP reserves the right to alter prices should its costs in hosting a course increase for reasons beyond its reasonable control (including, without limitation, the cost of labour, transport, parking charges and materials). In the event that a price is altered the client(s) will be notified as soon as reasonably possible and the balance of the altered price will be payable on the same terms as was the original price. In the event of the price being thus increased by 15% or more, the client may opt to cancel the booking and will then be entitled to a refund of all monies paid.

**4. Cancellation**

Given the substantial preparation and/or commitment of labour time by KHWP prior to any course or booking, the client must be aware of the following conditions and therefore agrees to such:

For individual bookings Training cancellation less than 40 days prior to the commencement of the course, payment will be retained but it can be transferred to another course, subject to availability. Cancellation within 20 days prior to the commencement of the course, full course fee will be retained, and no refund given. (Unless due to exceptional circumstances at KHWP’s discretion)

**5. Medical Questionnaires**

KHWP will not be liable for any medical incidents that are the result of non-disclosure on their medical questionnaire.

**6. Client Conduct**

Students and trainees are expected to behave in a reasonable manner at all times and to comply with the instructions and leadership of KHWP. KHWP reserve the right to remove any client(s) from the course at the discretion of the instructor/leader without recourse to repayment for that course and against the client(s) will if necessary. Circumstances that may warrant exclusion from a course include (without limitation): intoxication; use of recreational drugs; abusive behaviour; inappropriate or unsafe use of equipment; inability to meet the rigours of the course for physical or mental reasons, or through lack of appropriate equipment; inappropriate behaviour to trainers or other participants. If you are in any doubt about your ability to meet the rigours of the course, please contact your GP before booking. For removal of any party under such conditions, KHWP will not be liable for any losses as a result and KHWP are also entitled to any reasonable costs arising from removal of said client(s) payable upon demand.

**7. Insurance**

KHWP is covered to a level of £50,000,000 for Public Liability and is insured as a Countryside works and activities provider. KHWP clients are advised to provide their own personal insurance cover. Please note the conditions with your policy with regard "Hazardous Activities" and "working with hand tools".

**8. Liability**

KHWP courses take place in the outdoors which is an inherently a risky environment. While all reasonable precautions are taken to minimise the risk, the client accepts that accidents including serious injury and death can occur without KHWP being at fault and to the extent that the client is taking part in a KHWP course entirely at his or her own risk. The client also recognises that KHWP is not responsible for loss or damage to the personal property of the client, including vehicles, money, clothing and or equipment. The client also recognises that apart from the OCN Level 3 Forest School Practitioner Training and successful completion thereof; attendance of an KHWP course in no way qualifies him/her to teach the course content, it is not intended that any instructions provided to any client(s) while on a course will in any way qualify those client(s) to instruct any third party and no warranty is made to that effect. KHWP hereby excludes any liability it might have to any third party in respect of any loss or damage suffered or incurred by that third party in its reliance on any skills taught by any client(s) on the basis of having attended any KHWP course. KHWP accepts no responsibility for any mishap during a course from any instruction or information not given by KHWP appointed instructors or assistants. KHWP also takes no responsibility for any mishaps occurring as a result of the client`s failure to follow instructions. KHWP will only accept liability for physical injury to a client that is shown to result from negligence on the part of KHWP.

**9. Cancellation by KHWP**

In the event that KHWP cancels a course, all monies will be refunded in full, or if preferred, transferred as a deposit for another course. Please note that KHWP requires a minimum number of 5 clients to run a course. KHWP reserves the right to cancel all and any bookings without reason or notice. Under these unlikely circumstances, KHWP agrees to repay in full any deposits or course fees to the client.

**10. Complaints**

In the unlikely event that a client has cause for complaint about a KHWP course, the complaint should be made to a representative of KHWP during the event in order that corrective action can be taken if necessary. The client acknowledges that it is unreasonable not to raise an issue during a course and KHWP will not accept a complaint after the end of the course. If the complaint is about a member of staff, then please contact the office and we shall inform you of the complaints procedure and take the necessary action. However, should the problem not be resolved at source, a complaint should be made in writing within 28 days or this complaint will not be upheld

**11. Allergies**

If you suffer from any allergies at all from substances such as nuts then we advise you to fully cater for yourself. We cannot be held responsible should you have any allergic reaction, should you choose to consume any foodstuffs provided through KHWP.

**12. DBS**

All KHWP appointed staff are DBS enhanced checked. All Level 3 trainees need to demonstrate they are DBS checked prior to running their pilot programme.

**13. Photography**

We often take photographs throughout our courses and events to use for our promotional material and website. Please check the box for consent.

**14. GDPR**

We follow the Kent County Council guidelines for how to deal with your personal data. Summarised as follows:

Your data will be held by the Kent High Weald Countryside Partnership (KHWP), a not for profit conservation organisation hosted by Kent County Council.

Your contact details will be password protected, and will not be shared with any other organisation without your permission. These details will only be used for the purpose of contacting you about your training and related opportunities (In rare cases we may be legally required to share data with law enforcement agencies, or it may be necessary in an emergency to share your medical details with healthcare professionals).

If at any time you decide you do not want us to contact you or hold your details anymore, you can opt out by email or calling the number in the footer. You can also ask us to let you know what details we hold at any time.

For the full KCC policy use the link below:

<http://www.kent.gov.uk/about-the-council/contact-us/access-to-information/gdpr-privacy-notices/office-of-the-general-counsel/information-rights-privacy-statement>

Please sign the declaration electronically or type your name into the box

We take pictures of the training for record keeping, social media posts, our websites and other promotional media. Please give your consent to using your image by checking the box

Your details will be kept on a secure server for the duration of the course and deleted once you have received your certificate. If you would like to receive information about Forest School programmes, jobs, training and volunteering opportunities please tick the box