**Acknowledgement of risk**

I understand it is my responsibility as Group Leader to make the participants and their guardians aware that by the very nature of activities being undertaken, participants may get wet, cold, suffer minor cuts, grazes and bruises. I have read, understood and agree to the Terms and Conditions as stated and that I or the Group I am making the booking on behalf of will be responsible for payment of all fees as quoted in the booking correspondence.

|  |  |
| --- | --- |
| Arrival date |  |
| Group Leader name |  |
| Group Leader signature |  |
| Date of signature |  |

Please sign and return this acknowledgement to [contact@dclt.co.uk](mailto:contact@dclt.co.uk) or post upon receipt to:

Contact Centre

Doncaster Culture and Leisure Trust

The Dome

Bawtry Road

Doncaster DN4 7PD

**Please note we cannot accept your Group onto site at HAOC without this signed receipt prior to the date of arrival**