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# CH CYCLING CLUB

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CYCLING AND CYCLE SPORT  
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## PARENTAL CONSENT FORM

To be signed by the Parent or Guardian of club members under the age of 18.

I (name and address) .....

.....

being the Parent of (or Guardian of) .....

**A** I understand and agree that my son/daughter participates in events promoted under the Club's rules and regulations entirely at his/her own risk. I have considered and understand the nature of such events 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 whilst engaged in competition under the Club's Regulations.

**B** I understand that competitors over 16 years of age are permitted to compete on the public highway and must there assume full and entire responsibility for their own safety in relation to other traffic. I understand and have emphasised to my son/daughter that the function of marshals in such events is to do no more than indicate the direction the rider should take and that the responsibility for safety whilst negotiating corners, turns and other hazards must rest with the rider alone.

**C** I understand further and have impressed upon my son/daughter that all competitors in events on the open road must observe the law of the land relating to road travel.

**D** I agree that my son/daughter shall participate in such events without any liability whatsoever on the part of the promoter, promoting club, or any club or organisations affiliated thereto or their officials or members in respect of any injury, loss or damage suffered by him/her, however caused.

**E** I confirm that my son/daughter does not have any disability or medical condition, physical or mental, which could affect his/her ability to ride safely as a club cyclist. I understand that I must notify the Club Secretary at once if at any time my son/daughter becomes subject to a disability or medical condition, physical or mental, which could affect his/her ability to ride safely as a club cyclist.

**Signed Parent or Guardian:** ..... **Date:** .....

**Witness: (name and address)**

.....

..... **Signature:** .....