

## My consent for this trip

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone number/s: \_\_\_\_\_

Age: \_\_\_\_\_ Address: \_\_\_\_\_

Emergency contact person and phone: \_\_\_\_\_

Confirming Booking dates: \_\_\_\_\_

TICK HERE

**RISK STATEMENTS FOLLOW:**

☐ I am physically fit and have disclosed all medical conditions, allergies and disabilities that could affect me while engaged in water-based or land-based outdoor activities

☐ I accept that Robfish may cancel or postpone the trip for safety reasons

**CONSENTS:**

☐ I approve the taking of photographs of this trip and the use of them for my memories and for marketing

☐ I understand that I may not catch a fish

**MEDICAL STATEMENTS:**

What is your fitness level like? \_\_\_\_\_

I can swim TICK if YES ☐ TICK if No ☐

☐ Any relevant medical issues: i.e. Asthma or heart conditions? \_\_\_\_\_

☐ Do you have any allergies? \_\_\_\_\_ ☐ Medicine is with me \_\_\_\_\_

☐ Do you have any dietary restrictions? \_\_\_\_\_

**Gear please advise below:**

Note: any damage to gear due to poor handling or rod damage may result in a charge.

Simms wader size: i.e. M, L, XL \_\_\_\_\_ Simms (US) Boot Sizes: i.e. 8,9,10 \_\_\_\_\_

Lefthand or right hand wind flyreel \_\_\_\_\_

**FINAL CONSENTS:** I understand the risks associated with this trip. I give my consent to participate in the agreed trip and I will follow all the safety instructions of my guide. By signing this form I acknowledge that water-based and other outdoor activities are adventure activities with a degree of risk and the operator cannot guarantee my safety.

I agree to listen to instructions around safety first, in and around water. Some of the main hazards identified are:

A. Potential fast moving water. Obstacles in the river such as trees and rocks

B. Other anglers on the river and in close casting proximity

Sign here: \_\_\_\_\_

Date: \_\_\_\_\_