

community cycling event

to celebrate **Bike Club** and **Nigel Mansell's Charity Ride**
promoting **UK Youth's Positive About Youth**

23rd July, 11 am - 5pm at Cardiff Bay
(By the Light Ship)

Young people will be able to come and try a range of cycling activities including:

- **North Shore**
- **Family Treasure Hunt**
- **Pedal Power - Accessible Cycling**
- **Tredz Dr Bike** - bring your bike and get a free safety check!
- **Free Prize Draw** for participants to win a Bike donated by Tredz
- **YMCA Bling your Bike**

Bikes are available for young people to use on the North Shore Activity.

This event is free but young people will need to bring with them the **consent form** (printed on the back of the flyer) otherwise they won't be able to take part.

More consent forms will be available on the day.

More info: bikeclub.org.uk

**POSITIVE TEXT 'YOUTH' TO
ABOUT YOUTH? 84025**

* Text donations cost £1.50 plus your standard operator charge for one text. A minimum of £3.91 from each text message will be donated to UK Youth. You must be over 16 and have the full pager's permission to make a text donation. UK Youth is a registered charity - Charity No 1110280 (England & Wales). For more contact: 01425 675106





Community Cycling Event

PARTICIPANT FORM (Parental Consent Version)

Bike Club will be holding the above free cycling event. Activities available during the event are **North Shore, Family Treasure Hunt, Pedal Power - Accessible Cycling, Tredz - Dr Bike** – bring your bike and have some help in any maintenance, **YMCA Bling your Bike**. **In order for young people to participate in the activities they must bring this completed consent form with them.** This event is insured by CTC, the National Cycling organisation, staff are fully qualified. For more information about Bike Club please visit bikeclub.org.uk

YOUNG PERSON'S DETAILS			
First Name:		Last Name:	
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Date of Birth:
Address:		
		
		Postcode:	

Name of parent/carer:	
Telephone Number:	
Mobile Number:	

EMERGENCY CONTACTS		
Emergency Contact Name:		Relationship:
Telephone Number:		
Mobile Number:		

MEDICAL/SUPPORT INFORMATION		
Does your child have any conditions requiring medical treatment?	YES	NO
Does your child suffer from any allergies?	YES	NO
Is there any other information we need to know to help us support your young person?	YES	NO
Details if answered YES to any of the above:		
.....		
.....		
Name of Doctor:		
Name of Surgery:		Telephone Number:

EMERGENCY MEDICAL TREATMENT CONSENT
I give my consent that those in charge may give permission for my child to receive medical treatment in an extreme emergency where neither emergency contact has been able to be contacted.
Signed: _____ (Parent/guardian/carer)
Print Name: _____ Date: _____

PARENTAL/CARER CONSENT (Under 18's)
I give permission for _____ (name of young person) to take part in the cycle activities provided by Bike Club at the Community Cycle Event. I understand there are certain risks involved in these activities. The young person will act responsibly and will follow the rules of the activity. He/she is fit and healthy enough to take part in these activities. I hereby consent to the information provided on this questionnaire and information about my participation in later project activities to be processed by CTC Charitable Trust for the purpose of monitoring the impact of their projects. The CTC will control your personal data in compliance with the Data Protection Act 1998. It will be used to help monitor the success of our programmes and to help in planning future sports activities for children and young people. Your data will not be disclosed to anyone outside Bike Club, except where impersonal statistical data may be derived and used for management analysis and reporting statistics to funding bodies.
Signed: _____ (Parent/guardian/carer)
Print Name: _____ Date: _____
Relationship to Young Person: _____