

W A R W I C K  
*Lanterne Rouge*  
C Y C L I N G C L U B

**PARENTAL Consent Form**

Warwick Lanterne Rouge Cycling Club (WLRCC) welcomes membership to anyone interested in the sport. It is required that parents or guardians of those under the age of 18 years wishing to participate in any club activities complete this parental consent form. Those aged 14 or under are required to have an accompanying rider aged 18 or over. This can be any number of nominated persons (family, friend or anyone else deemed fit by the parent/guardian) but they must be accompanied by at least one on any club activities. A membership is required to participate in any club activities once you have ridden with the club 2-3 times. Details on joining the club and membership benefits can be found at [www.wlrcyclingclub.co.uk/join](http://www.wlrcyclingclub.co.uk/join) . Please feel free to contact Warwick Lanterne Rouge Cycling Club to discuss any queries.

**Please read through the form carefully and complete all sections required including a consent signature. Completed forms to be returned to [wlrc14@gmail.com](mailto:wlrc14@gmail.com) .**

Any information provided about your child will be securely and confidentially stored. It will only be used for the purpose of contacting you or your child regarding future club rides and events where your child could get involved in cycling; or to provide you with information about British Cycling membership.

With your permission the club may also take photographs/video footage during club activities. These images may be used for general publicity purposes, Club website and social media platforms operated by the club. If you are happy for photographs/video footage to be taken and used in this way, could you please tick 'Yes' in the photographs/videos permitted box below.

**Photography/video permitted:** Yes  No

**Parents or guardians to note**

1. the demands of the cycling activity and that they alone can make the decision about the ability of their child to complete it
2. that the child may cycle with other adults and/or with other children
3. that while WLRCC extends a welcome to cyclists under 18, no special provision for children is made
4. arrangements to get to and from the event are the sole responsibility of the parent or guardian.
5. At no time will children be in the charge of a single adult, but DBS checks on the ride leader or other adults on the ride may not have been undertaken
6. A cycling helmet MUST be worn at all times during the activity.

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Being the parent/guardian of the above rider I:

i. understand and agree that my son/daughter participates in events promoted under the WLRCC Cycling Club's rules and guidelines entirely at his/her own risk. I have considered and understand the nature of such events and have discussed them with my son/daughter.

ii. confirm that son/daughter have read and understands the highway code for cyclist (rules 59 to 82) and a correctly fitted helmet will be worn at all times whilst cycling.

iii. am satisfied that my son/daughter is sufficiently responsible and competent to assume full and entire responsibility for his/her own safety.

iv. understand that riders under 18 years of age are permitted to cycle on the public highway and must therefore assume full and entire responsibility for their own safety in relation to other traffic.

v. understand further and have impressed upon my son/daughter that all riders in rides on the open road must observe the law of the land relating to road travel.

vi. agree that my son/daughter shall participate in such events without any liability whatsoever on the part of the promoter, WLRCC Cycling Club, the British Cycling Federation, any club or organisation affiliated thereto or their officials or members in respect of any injury, loss or damage suffered by him/her, provided that this does not exclude the liability of any such party for death or personal injury arising from that party's negligence.

vii. understand that I am responsible for ensuring my son's/daughter's bike is in a safe and roadworthy condition.

viii. 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 cyclist. I understand that I must notify the Youth & Welfare Officer of WLRCC Cycling Club 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 cyclist.

ix. confirm that my son/daughter will carry an In Case of Emergency card with them detailing any medication, pre-existing conditions and allergies they have as well of their next of kin's details.

x. understand it is my personal responsibility to obtain third party liability insurance and that WLRCC Cycling Club and its members shall not be held liable for claims made whilst participating in club activities within or outside the scope of the club.

xi. confirm that on all club activities one of the above nominated riders will be present at all times with my son/daughter.

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**Young rider's details:**

Name in full:

Date of Birth:

Rider's mobile phone number:

I.C.E. Phone No 1:

**Consent & Parent's/Guardian's Details**

Name in full:

Address:

Town/City:

Postcode:

Phone number (landline):

Phone number (mobile):

Email address:

**Signed :**

**Date :**

**Further Details if required**

**Accompanying Riders' Details if not the Parent/Guardian**

Name in full:

Address:

Town/City:

Postcode:

Phone number (landline):

Phone number (mobile):

Email address:

