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| --- | --- | --- | --- | --- | --- | --- | --- |
| Name | Telephone No | Emergency Contact No | Stage 1 | Stage 2 | Stage 3 | Participant signature \* |  |
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\*on signing the form you acknowledge that you have read and understand the risk assessment. Digital signatures are acceptable.

When completed, please return to Paul Brookes – paul@burleyview.co.uk