

NEW-HF Walkers

WALK REGISTER

Date of Walk:

Location of Walk:

Length:

Start Time:10:00am.....

Walk Leader:

Weather:

I understand that I take part in today's walk entirely at my own risk and that neither NEW-HF Walkers, nor individual walk leaders, will accept liability for any injury or loss I may incur.

I am aware of the length of the walk and confirm that, to my knowledge, I do not have any medical condition or impairment that prevents me from taking part in today's walk.

I understand that it is safer to walk behind the leader.

Due to Covid-19 Restrictions, we need to collect your name and a contact telephone number. This information will only be used if requested by NHS contact tracers - and no one else. The list will be destroyed after 21 days.

REMEMBER – You walk entirely at your own risk

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