

MEMBER CONSENT & DISCLAIMER FORM

(For all participants)

Exposed Photo Club/BSOP – Photography Walk Participation Form

☐ Participant Details

Full Name: _____

Phone Number: _____

Emergency Contact Name & Number: _____

☐ Agreement

I understand that:

- Photography walks involve outdoor activity with potential risks (e.g. uneven ground, traffic, weather).
- I take part at my own risk.
- I am responsible for my own safety, equipment, and personal belongings.
- I will follow instructions given by the walk leader.
- I will behave respectfully towards the public and other members.

☐ Photography & Conduct

- I understand I am responsible for complying with UK photography laws and privacy considerations.
- I agree not to act in a way that could bring the club into disrepute.

☐ Health Declaration

Please list any relevant medical conditions (optional):

☐ Signature

I confirm I have read and agree to the above.

Name: _____

Signature: _____

Date: _____