

THE SENSORY HIVE - WAIVER & CONSENT FORM



 The Sensory Hive

Address: Weyman Avenue, Whiston, Merseyside, L35 2YW

Phone 0151 832 6915 **Email:** hello@thesensoryhive.co.uk

PLEASE READ CAREFULLY

This is an important document.

You must read it fully and sign the Consent and Waiver at the end of this document before participating.

1. Key Terms

- **'The Activities'**: All activities organised by **The Sensory Hive Ltd** including but not limited to:
 - **Sensory Gym**: scooter boards and ramps, parkour structure, basketballs, balance surfboard, balance cross beam, monkey bars, zipline, swing bridge, balance togas, soft steps, ramp log and rope, slide, swings, mezzanine areas, toddler soft play, and trampoline.
 - **Sorcha's Sanctuary**: immersive interactive room and its equipment.
 - **Therapy Space**: sensory integration clinic and equipment.
 - **Other**: Any other timetabled or one-off events and sessions.
- **'User'**: Any person participating in The Activities (including children, adults, parents, carers, supervisors).
- **'You'**: The person signing this form, providing consent either for yourself or for a User.

2. Consent Requirements

- All users aged 18+ must read and consent to this agreement.
- Users under 18, or adults lacking capacity, must have consent provided by someone with **Parental Responsibility (PR)**.
- If you are signing on behalf of someone else with PR, you must have their consent before doing so.

3. Your Acknowledgement

By signing the Waiver and Consent Form, **you agree to:**

- Recognise the risks associated with participation in The Activities.
- Take responsibility for assessing if the Activities are suitable for the User.
- Ensure the User follows all safety rules, pre-participation information, and any verbal instructions.
- Confirm that the User is fit, well, and has no medical condition that would prevent safe participation.
- Understand that The Activities involve physical effort, height, speed, and unpredictable surfaces.
- Accept that personal injury risks exist, including friction burns, bruises, strains, breaks, or more serious injury.

4. Health & Safety Rules

◆ Supervision and Responsibility

- You are responsible for the User's supervision and safety at all times.
- You must ensure Users behave safely and follow staff instructions.

◆ **Equipment and Zones**

- Sorcha's Sanctuary, scooter board area, ninja course, trampoline, mezzanine floors, and slide areas are interconnected and not fully enclosed.
- Equipment such as scooter boards, parkour structures, and slides are designed for **ages 4 and over**. Younger users may access at their own risk under supervision.

◆ **Mixed Age Sessions**

- Sessions may include all ages, including adults.
- You must supervise young and small children carefully.

◆ **Dress Code**

- Socks must be worn at all times.
- Remove badges, jewellery, and sharp items.
- Wear retainer straps and shatterproof lenses if glasses are worn.
- Long sleeves and trousers recommended to avoid friction burns.
- Loose clothing must be tucked in. Avoid cords, ribbons, and ropes.

◆ **Food, Drink, and Hygiene**

- No food, drink, or gum in activity areas.
- Only food bought from The Sensory Hive café may be consumed, unless due to allergies, intolerances, or restrictive eating (please inform staff first).
- Clean up and report spills immediately.
- Anyone who has been unwell must wait **48 hours** before visiting.

◆ **Facilities and Changing Areas**

- Use designated baby change and toilet facilities.
- Dispose of waste properly.

◆ **Accidents and Damage**

- Report all accidents or damage to staff immediately.

◆ **Behaviour and Conduct**

- Aggressive or abusive behaviour will not be tolerated.
- Management reserves the right to refuse entry.

◆ **Weight Limits**

- Maximum user weight for most equipment: **18 stone (114kg)**.
- Recommended weight for rebound trampoline: **12.5 stone (80kg)**.
- Participation above these weights is at your own risk.

◆ **Other Important Rules**

- No smoking, vaping, or alcohol on site.
- CCTV is in use for safety and crime prevention.
- Personal belongings are your responsibility (lockers available on request).

5. Photos, Videos, and Privacy

- Photos and videos will **only** be taken by staff with your permission.
- Your data will be handled in accordance with **UK GDPR** rules.
- Waiver & Consent forms are kept indefinitely unless revoked or updated.
You must update us if your health, support needs, or contact details change.

PLEASE COMPLETE AND SIGN THE CONSENT FORM OVERLEAF

THE SENSORY HIVE - WAIVER & CONSENT FORM

PARTICIPANT DETAILS (user)

Name: _____

Date of Birth: _____

Health or Support Needs: (Tell us anything we should know)

GUARDIAN / CARER DETAILS (Required if participant is under 18 or lacks capacity to consent)

Name: _____

Relationship (parent, carer, etc.): _____

Phone Number: _____

WAIVER OF LIABILITY

I, the undersigned, acknowledge and agree that:

1. Participation in activities at The Sensory Hive involves physical movement and sensory experiences, and may carry a risk of injury, despite all reasonable safety measures being in place.
2. The Sensory Hive staff will aim to be present the gym when possible, but ultimate responsibility for supervising the participant lies with the parent/carer (or participant if applicable).
3. I confirm that the participant is physically able to engage in the activities offered, or that any additional needs have been fully disclosed to staff to ensure appropriate and acceptable reasonable adjustments are made.
4. I understand the safety rules set out in the above document and accept the terms of participation freely and voluntarily without any inducement prior to signing/submitted this form.
5. I confirm that all users and supervising adults have watched the Company's safety briefing video (on the company website) and are aware of the company guidelines, rules and recommendations.
6. In the case of a medical emergency, I consent for basic first aid to be administered and, if necessary, for emergency services to be contacted.
7. I release The Sensory Hive, its owners, staff, and volunteers from all liability for any injury, loss, or damage incurred during participation, except where caused by negligence.
8. I acknowledge that the information provided is true to the best of my knowledge and this waiver will be deemed void if false information is provided.

 **CAPACITY AND CONSENT** (Please tick)

I am over 18 and have the capacity to understand and consent to participation myself.

I am the parent / guardian / legally appointed representative and am providing consent on behalf of the participant.

If required, proof of guardianship, Power of Attorney, or legal representation may be requested.

 **PHOTO/VIDEO CONSENT** (Please tick)

I consent to photographs and/or video recordings being taken during activities for promotional or educational purposes.

I do not consent.

 **SIGN HERE**

Signature: _____

Print Name: _____

Date: _____

 **Important Notes**

- This Waiver and Consent form will last indefinitely unless revoked or updated.
- This form must be updated if the participant's health, support needs, or contact information changes.
- Information will be stored securely and used in accordance with GDPR and UK Data Protection Law.

THANK YOU! 