### Part One

All guests joining a Green Farm Retreat are requested to complete Parts One and Two of this form. Please complete Part Three if you are participating in yoga, exercise or any other “active” activity. The completed form should be emailed to info@greenfarmkent.co.uk as soon as possible.

The information received will allow us to plan aspects of the Retreat more effectively to suit your needs and interests and to ensure you get full benefit from your time at Green Farm. Any information you provide will be treated in the strictest confidence and will not be disclosed to any individual or organisation not involved with your retreat.

|  |
| --- |
| Name  |
| Email (BLOCK CAPITALS PLEASE)  |
| Address  |
| Mobile  |
| Date of Birth  |
| Emergency Contact (Name and Tel)  |
| How did you hear about Green Farm? |

### Part Two:

### Please tick if you are allergic to any of the following Allergens:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** |  | **Yes** |
| **Celery**  | [ ]  | **Cereals**  | [ ]  |
| **Crustaceans**  | [ ]  | **Eggs**  | [ ]  |
| **Fish**  | [ ]  | **Lupin**  | [ ]  |
| **Milk**  | [ ]  | **Molluscs**  | [ ]  |
| **Mustard**  | [ ]  | **Nuts**  | [ ]  |
| **Peanuts**  | [ ]  | **Sesame seeds**  | [ ]  |
| **Soya**  | [ ]  | **Sulphur dioxide (sometimes known as sulphites)** | [ ]  |

|  |
| --- |
| Please give details here if you have answered “yes” to anything above: |
| Do you have any other dietary requirements or foods that you DO NOT LIKE, for example Spice, Coconut etc? If you do not provide us with your requirements we cannot promise to meet your needs. |
| Do you have any other allergies/intolerances that we should know about, i.e non-food related? |
| Signed:  | Date: |

### Part Three

Please complete this part if you are participating in any “active” activity – e.g. yoga, exercise etc.

|  |  |
| --- | --- |
| Activity: Yoga YES: [ ]  No [ ]  Exercise YES: [ ]  No [ ]  Other: |  |
| Have you participated in this type of activity before? YES: [ ]  No [ ]   |
| If ‘YES’ please provide further details e.g. how long for, which style, current practice |
| What is your main reason for coming to an active Green Farm Retreat? |

The following information is required to ensure your safety. Whilst yoga may be practiced safely by the majority of people, there are certain conditions which require special attention. If you are unsure, please consult your GP before commencing class. This will also help us ensure that you have the best possible experience on the weekend.

|  |  |  |  |
| --- | --- | --- | --- |
| **Do any of these health conditions apply to you?** | **Yes** | **Do any of these health conditions apply to you?** | **Yes** |
| High blood pressure | [ ]  | Recent fractures/sprains | [ ]  |
| Low blood pressure/fainting | [ ]  | Recent operations | [ ]  |
| Arthritis | [ ]  | Back problems | [ ]  |
| Diabetes | [ ]  | Knee problems | [ ]  |
| Epilepsy | [ ]  | Neck problems | [ ]  |
| Heart problems | [ ]  | Recent pregnancies | [ ]  |
| Asthma/Respiratory Problems | [ ]  | Are you pregnant? | [ ]  |
| Depression or Anxiety | [ ]  | Do you have any other conditions which affect your mobility or are likely to cause you concern when doing Yoga or generally participating in the weekend? | [ ]  |
| Detached retina/other eye problems | [ ]  |
| Please give details here if you have answered “yes” to anything above: |