

South Australian Herpetology Group



Field Survey Consent Form

This form is an appendix to the document:

PROTOCOL FOR PARTICIPATING IN SAHG FIELD SURVEYS

The form must be completed by participants in field surveys & returned to the Trip Leader before commencing survey activities.

The personal information provided below will be maintained confidentially by the Trip Leader. The information will only be provided to first aiders, paramedics or medical & hospital staff in the event of an accident, illness or other emergency during the survey period.

Survey:	Commencement date:
Surname:	First name:
Address:	
Phone:	Mobile:
Email:	
Who would you like the Team Leader or delegate to contact in the event of an emergency:	
Surname:	First name:
Phone:	Mobile:
Please list any medical conditions or medications being taken that a first aider, paramedic or hospital should be aware of if emergency treatment is required:	
I have read the document Protocol for participating in SAHG field surveys & agree to comply with the policies & requirements stated in this document. I understand the potential hazards to which participants may be exposed during the field survey.	
Signed:	Date: