**Maybo Physical Skills Training - Participant Declaration Record**

**Participant Name:**

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| **PRE-COURSE DECLARATION** |  | |
| * I received my trainer’s Maybo safety briefing and have been advised of environmental risks present during this course. * I am fully aware that there are both risks and benefits associated with the training, practice and application of physical skills in the context of my workplace. * I am fit for normal work duties and by participating in this course I confirm that I am able to engage in light to moderate physical activity. * I understand that I should only use Maybo methods in a work setting that supports their use. * I understand it is my responsibility to inform the trainer if I experience any injuries or physical discomfort during the course. * I understand that I must act in accordance with legislation, local laws and guidance for my area of work. * I understand that I do not have to participate in any activity that I believe may place myself or others at risk of harm, and that I can participate at a level I am comfortable with in consultation with the trainer. * I understand that I need to practice techniques responsibly and not use high levels of resistance or force. * I understand the importance of disclosing pre-existing injuries, relevant health conditions and pregnancy.   Tick the following as appropriate and discuss privately with your trainer   * + I do not have any pre-existing injuries or health conditions, or   + I do have pre-existing injuries or health conditions, listed below.   + I consent to Maybo processing my personal data regarding any pre-existing health conditions or injuries for the purpose of providing the services and complying with Maybo’s legal obligations. Maybo processes this information in accordance with its [Privacy Policy](https://www.maybo.com/privacy/)at<https://www.maybo.com/privacy>**.** | | |
| Pre-existing injuries, relevant health conditions or pregnancy, if applicable | | |
| Participant signature | | Date |
| Trainer notes on declarations and controls | | |

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| **POST COURSE DECLARATION** |  | |
| * I fully participated in the training, understood the content and demonstrated the skills covered by the trainer. * I was shown a video of every physical skill covered on the course. * I understand Maybo physical skills should only be used as a last resort. * I understand I must attend a refresher course every 12 months to continue to use Maybo physical skills. * I understand I have a legal duty to declare if I experienced any injuries or physical discomfort during the course.   Tick the following as appropriate and discuss privately with your trainer   * + I did not experience any injury or physical discomfort during the course, or   + I did experience injury or physical discomfort during the course, described below.   + I consent to Maybo processing my personal data regarding any injury or physical discomfort experienced during the course for the purpose of investigating any potential injury and notifying its insurers. Maybo processes this information in accordance with its [Privacy Policy](https://www.maybo.com/privacy/) at <https://www.maybo.com/privacy>. | | |
| Injuries or physical discomfort experienced during the course, if applicable | | |
| Participant signature | | Date |