Insurance declaration form for BS423/44

Froglife can provide free insurance to cover Patrollers for Public Liability Insurance and Personal Accident Insurance. Simply, **read the appropriate Health and Safety information (contained in the Patrol Pack) and the Risk Assessment, and sign and return this declaration form**. ALL patrollers must sign one of these forms and return it to us otherwise they WILL NOT be covered. Further copies can be downloaded from the website or posted on request.

**Volunteer Declaration**

***Please tick both boxes, fill out the details and sign and date below.***

I/We have read and understood the Health and Safety information contained in   
the Froglife Toads on Roads Patrol Pack

~~I/We understand the risks associated with Toad Patrolling and have undertaken   
a full Risk Assessment accordingly~~

**A risk assessment has already been carried out by another Patroller:**

*I/We understand the risks associated with Toad Patrolling and have read and   
understood the Risk Assessment for Toad Patrolling at this site -* **AJR2024CV**

**Your details**

Name/s ………………………………………………………………………………………………

Address ……………………………………………………………………………………………

………………………………………………………………………………………………………

Telephone number/email address ………………………………………………………………

**TOAD CROSSING** …CHEW VALLEY………………… **SITE ID** …BS423/44…………………

**I confirm that, when undertaking activities on behalf of Froglife, I will do so in accordance with the procedures contained in the documents mentioned above.**

*All named persons must sign in the box below or, if under-18, the form must be signed by a parent/guardian.*

Signed: Date: ……………………

□ Signed on behalf of an under-18

**For forms submitted electronically, please either insert an electronic signature above or tick this box to confirm agreement with this declaration** 🞎