

Parental/Guardian Consent Form

Details of Trip/visit

Journey/visit to		
Activity to be undertaken		
Date		
Pick up	Venue	Time
Return	Venue	Time
Transport		
Contact details for worker in charge	Name	
	Phone number	
	Mobile number	
	Email address	

I agree to my son/daughter: _____ (name) D.O.B _____ taking part in the above-mentioned visit, and having read the information sheet, agree to his/her participation in any or all of the activities described.

Medical Information

Does your son/daughter suffer from any condition requiring medical treatment, including medication? *Please include TRAVEL SICKNESS here

Yes No

If Yes, please give brief details:

To the best of your knowledge, has your son/daughter been in contact with any contagious diseases or suffered from anything in the last four weeks that may be/become contagious or infectious?

Yes No

If Yes, please give details:

Is your son/daughter allergic to any medication?

Yes No

If Yes, please specify:

Has your son/daughter received a tetanus injection in the last 5 years?

Yes No

Please outline below any special dietary requirements of your child

I undertake to inform the leader in charge as soon as possible of any changes in the medical circumstances between the dates on which this form is signed and the commencement of the journey.

Declaration

I agree to my son/daughter receiving emergency treatment including anaesthetic, as considered necessary by the medical authorities present.

I may be contacted by telephone at the following numbers	
Work	Home
My home address is	

If Not available at above, please contact:

Name	Contact Number
Relationship to young person	
Address	

Name, address and telephone number of family doctor:

Name	
Address	
Contact Number	

We require written consent for the following:

I agree that my son/daughter _____ (name) can:

- have their photograph taken (please tick) Yes No
- be recorded Yes No
- be filmed Yes No

I give my consent for these images to be used for the following purposes:

- social media sites (please tick) Yes No
- newspapers, newsletters & magazines Yes No
- our website and Generations Working Together website Yes No
- promotional literature (flyers, leaflets, posters) Yes No
- staff records Yes No

Please ensure that all sections of the form are completed as accurately as possible, please sign below:

Signed _____ Date _____

Print name _____

This form or a copy must be taken by the leader on the activity. A copy must be retained by the head of establishment.