

**PARENT'S CONSENT FORM**

*Appendix D*

School (or Youth Centre): \_\_\_\_\_

A journey to \_\_\_\_\_ (place)

from \_\_\_\_\_ (date) to \_\_\_\_\_ (date)

I wish my son/daughter \_\_\_\_\_ (name of child)

to be allowed to take part in the above-mentioned school (or youth centre) journey and, having read the information sheet, agree to his/her taking part in any or all of the activities described.

I have ensured that my child understands that it is important for his/her safety and for the safety of the group that any rules and any instructions given by the staff in charge are obeyed. I acknowledge the need for my child to behave responsibly.

Please delete and complete the following as is appropriate:

My child has  no illness, allergy or physical disability

the following illness or physical disability

*\*Cross out which does not apply*

\_\_\_\_\_  
\_\_\_\_\_

which necessitates the following medical treatment \_\_\_\_\_

\_\_\_\_\_

I consent to any emergency medical treatment necessary during the course of the visit.

I consent/do not consent\* to my son/daughter being given a mild painkiller (paracetamol) if considered necessary by the party leader.

*\*Delete as applicable*

Signed: \_\_\_\_\_ (Parent/Guardian)

ADDRESS HOME

WORK

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel No: HOME \_\_\_\_\_

WORK \_\_\_\_\_

If not available at the above, please state an alternative contact

Name: \_\_\_\_\_

Tel No: \_\_\_\_\_

(Three copies of this form are desirable – one for the parent to keep, one for the Duty Officer and one for the Party Leader to take with him/her on the visit/activity/journey)