

Parental Consent for church youth activities

The Warfield Church is a CofE Parish and registered Charity 1129301.

This form is designed so a parent/guardian of each young member of the Church has to complete only one form for up to 3 years involvement in the church.

We recognise that circumstances change. Please inform the church in writing of these changes as soon as possible.

This form covers both weekend services and social events/trips at other times.

Young Person's Details

Full Name.....

Address.....

Mobile.....

E-mail address.....

Date of Birth / /

School.....

School year group.....

While your child is in our care it would be helpful for us to know whether he or she suffers from any allergies or phobias, or has any medical conditions or disabilities:

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Details of any medication (please ensure an adequate supply is brought to events and given to one of the organisers, if it is needed):

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Details of any dietary requirements:

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Any other information you think the organisers should know:

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.....

Parent or guardian’s contact details:

Name.....
Phone Number.....
Mobile Number.....
Email.....
Relationship to child.....

If parent or guardian is not available please contact:

Name.....
Phone Number.....
Mobile Number.....
Relationship to child.....

Family doctor’s details:

Name.....
Address.....
.....
Phone Number.....

Consent

I give consent to my child taking part in group social events (this could include nights away and coach / mini bus trips) and with activities at weekend services. I also give consent that they can make their own way from any of these events if necessary, otherwise I will take full responsibility for their transport. Yes No

I agree to photographs and short videos of activities including my child to be taken for use within church meetings and for possible publication and publicity purposes, including newspapers or the internet Yes No

***NB** Contact details and other personal information will be kept and used in accordance with the 1998 Data Protection Act and the relevant Church of England guidelines.*

I agree to any emergency treatment being given as considered necessary Yes No

***NB** The medical profession takes the view that a parent’s consent to medical treatment cannot be delegated. Medical consent forms have no legal status and a doctor has the right to insist on parental consent before treating a child. We have found, however, that medical staff find this type of general consent helpful.*

We recognise that circumstances/information changes and if it does it is my responsibility as a parent/guardian to make the organisers aware in writing so that changes can be made to the existing form or a new form can be completed.

Signed Date / /
Printed

For events outside the usual programme, we will endeavour to keep you informed, with up-to-date information, via email. If you **DO NOT** wish to be contacted via email, please tick here