



## Parent's Consent Form

I would like ..... (name of child) to be allowed to participate in the Emsworth Baptist Church youth work. I confirm that I have read the information sheet and agree to his/her taking part in the activities, some of which may be events away from the church premises.

I have no objection to photos that include my child being used on the youthwork internet pages, so long as his/her name is not associated with the pictures.

I understand that, while the adult helpers in charge of the youth work will take all reasonable care of the children, they cannot be held responsible for any loss, damage, or injury suffered by my son/daughter in travelling to or from or taking part in any of the activities unless such loss, damage, or injury is directly attributable to the negligence of the said helpers in charge of the party.

My child's NHS number is: .....

I would like to inform you that my child has the following allergy or physical disability or illness:

.....  
.....

which necessitates the following medical treatment: .....

.....  
.....

*(Please note details of any medical condition, allergies or special physical needs will be held in confidence and are needed in order that we can, wherever possible, provide for that need & inform you of any special arrangement that we can make.)*

In case of accident, illness or emergency, I authorise the adults in charge to give permission to medical authorities to undertake any treatment necessary for my son/daughter, which might include the use of anaesthetics.

Signed ..... } (Parent/Guardian)  
Full Name (Printed) Mr / Mrs .....

Address: .....

Postcode .....

Home Tel. .... Mobile: .....

Work Tel. ....

In the event you are not contactable, please give an alternative contact:

Name..... Tel.....

Name and address of family doctor: Name .....

Address.....

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Tel.....

Office use only:

School Yr : 

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www.youthgroup.org.uk