Personal Information:

\_\_\_\_\_\_\_\_\_\_\_\_YOUTH GROUP

|  |  |
| --- | --- |
| Name |  |
| Surname |  |
| Phone |  |
| email |  |
| Medical Needs |  |
|  |  |
| Caregivers/Emergency Contact | |
| Name |  |
| Surname |  |
| Number |  |
| email |  |
| Name |  |
| Surname |  |
| Number |  |
| email |  |

Permission Slip:

Dear Parents/caregivers,

As part of the \_\_\_\_\_\_\_\_\_ programme your child will occasionally be involved with activities outside the \_\_\_\_\_\_\_\_\_\_\_ Grounds. We therefore ask permission for your child to be able to enter into such activities. Your child will be fully supervised at all times.

I give permission for my son/daughter to attend these activities. We understand that they will follow the instructions and rules of the youth leaders and co-ordinators.

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Care:

I understand that in the event of an emergency I have given permission for the youth leader to act in the safety interests of my child. I understand that every attempt will be made to contact me first before any decision is made regarding treatment or medication.

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Photo/Image Consent:

Throughout the year articles about \_\_\_\_\_\_\_\_ may be published in community newspapers, on the pastoral area FB page and website and other publications. We ask your permission to use images of your child in these publications to promote the group and their activities.

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_