

Aldbourn Youth Council

Consent Form –

Activities (please include dates).....

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Total cost if any..... (Please make cheque payable to Aldbourn Youth Council)

In order to ensure the proposed activity is planned, agreed and safe for all, this form must be completed and returned as below;

- If you are under 18 years of age, you will not be allowed to participate in this activity unless this form is signed by your parent/guardian
- All participants must sign the declaration form at the end
- This form must be completed and returned at least one week before the date of the proposed activity you are signing up for.
- NB places are secured on a first come first served basis upon receipt of this completed form and any payment due.

Name of Participant

Name of Parent/Guardian.....

Address.....

Relationship to participant.....

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Address.....

Date of Birth.....

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Telephone number.....

Email.....

Emergency contact number.....

Details of any Allergies, Medical conditions, dietary requirements and anything else you think we should be made aware of

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Declaration Parent/Guardian

- I have read and fully understood the information relating to the proposed activity
- I am satisfied that all reasonable care will be taken for the safety of participants
- I consider my son/daughter/ward to be medically fit to participate in their chosen activity
- I agree to my son/daughter/ward to receiving medication and emergency dental/medical surgical treatment, as considered necessary by medical authorities present
- I agree my son/daughter/ward will abide by the rules and policies set by AYC, act upon instructions given by staff and failure to do this will result in them being removed from an activity.

Print Name.....Signed.....Date.....

Participant declaration

I agree to abide by the rules and policies set by Aldbourn youth council and act upon instructions given by staff. Failure to do this will result in my being removed from the activity.

NameSignature.....Date.....