

# The Church of Scotland

## Activities & Day Visits Consent Form

Part A to be completed by Children's Worker. Part B to be completed by person with parental responsibility (this does not include a foster carer). This form should be taken by the senior group leader on the activity and forwarded to the coordinator on return

<b>Part A</b>	
Name of congregation and group	
Date of activity	Departure place & time
Type of activity	Return place and time
Venue/destination	Cost
Transport arrangements	
Items to be brought (e.g. coat, swimming kit, packed lunch, money, etc.)	

<b>Part B</b>	
Name and address of child or young person	
Please give details of any medical conditions (e.g. asthma, epilepsy, diabetes, dietary needs) or disability that may be affected by this activity.	
Any instructions for leaders:	
Your telephone number(s) for emergency contact	Day Evening
Name of alternative parental contact if you are unavailable, with telephone number(s)	Day Evening
<ul style="list-style-type: none"> <li>• I have read the above information and I give permission for my child to take part in this activity.</li> <li>• I understand that while involved in the activities of this group, he/she will be under the control and care of the group leader and/or other adults approved by the church leadership and that while the staff in charge of the group will take reasonable care of the children, they cannot necessarily be held responsible for any loss, damage or injury suffered by my child during, or as a result of, the activity.</li> <li>• I enclose a cheque or cash to the sum of £ _____</li> </ul> <p><b>Please tick one box for each of the following:</b></p> <ul style="list-style-type: none"> <li>• In an emergency and/or if I cannot be contacted, I am willing for my child to receive necessary hospital or dental treatment, including and anaesthetic               <ul style="list-style-type: none"> <li><input type="checkbox"/> Yes                      <input type="checkbox"/> No    If NO please state what action we should take:</li> </ul> </li> <li>• I give permission for my child to take part in photographic activity, including digital &amp; video, within this group.               <ul style="list-style-type: none"> <li><input type="checkbox"/> Yes                      <input type="checkbox"/> No</li> </ul> </li> </ul>	
Signature _____ (parent or adult with parental responsibility)	
<b>To be completed by children over 12 years and New Horizon Children:</b>	
I give my permission to be included in photographic activity, including digital & video, within this group.	
Child's Signature _____	

