



Camps and Residential Holidays Consent form

This completed form should be taken with the worker to the camp or on the residential holiday.

To be completed by a children’s worker

Name of Congregation and group:

Date of Activity:

Type of Activity:

Venue/destination:

Departure place and time:

Return place and time:

Cost:

Transport arrangements:

Items to be brought (e.g. sleeping bag, coat, swimming kit, packed lunch, money, etc):

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To be completed by the parent or guardian of the child or young person

Name and address of child or young person:

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Details of any regular medication, medical condition (e.g. asthma, epilepsy, diabetes, allergies, dietary needs) or disability which may affect normal activity:

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During the camp the child or young adult may be involved in outdoor activities under the supervision of trained personnel. Please detail any activities you do NOT wish your child to take part in.

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Consent:

- I have read the above information and I give permission for my child as named above to participate in this activity.
- In an emergency and/or if I cannot be contacted, I am willing for my child to receive necessary hospital or dental treatment including an anaesthetic.

Yes No

I enclose a cheque or cash in the sum of £ _____

Signature of parent or guardian of the child or young person:

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Contact number for duration of event:

Date:

Please let us know if any of your contact information has changed:

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Should you have any questions concerning the use of the information you provide please contact the Safeguarding Coordinator.