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**Parental / Guardian Consent Form\***

**Specific Activity**

*The information contained in this consent form will be kept confidential and only shared with personnel on a “need to know” basis. If you do not fully understand any of the following, need further information or wish to discuss any of your answers, it is most important that you contact the organiser of the activity immediately.*

*This information is not designed to exclude your son or daughter. Rather our intention is to ensure that parents/ guardians, youth leaders and organisers are fully aware of the details of this activity / programme, any special risks or concerns and any special supports that may be needed to be put in place.*

*Our top priority at all times is the safety of all participants at all times and your co-operation is essential in this regard.*

*\* (Essential for all children aged under 18).*

*Activity:* \_\_\_\_\_

*Leaders* \_\_\_\_\_

*Name of Young Person:* \_\_\_\_\_

*Age:* \_\_\_\_\_

*Name of Parent / Guardian* \_\_\_\_\_

*Address* \_\_\_\_\_

\_\_\_\_\_

*Contact Telephone No:* \_\_\_\_\_ *E mail:* \_\_\_\_\_

*Other Relevant Information (e.g. medical condition, special needs, dietary Requirements)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I have read and understood the activity outline accompanying this permission slip. I am satisfied that I have been sufficiently informed by the activity and I agree to allow the young person named above to take part in this activity.*

*Signed:*

*Date:*

*Relationship to named person:*