Form 10 Parental consent



Parish name			Protecting Children in the Catholic Church			
valid for the dur parish with writt	gned to be completed by a parent or care ation of the child's time at the parish and ten consent for the child to attend the list e parish if there are any changes as soon a	in signing the form, a parent or coed activities. We recognise that cir	arer is providing the			
Name of activity:		Day and time activity				
CHILD/YOUNG	PERSON'S DETAILS					
Full name						
Address						
Phone No.	Emai					
Date of birth	Age	School				
Does your child suffer from any allergies or phobias or have any medical conditions or disabilities?						
Details of any m organisers).	edication (please ensure an adequate sup	ply is brought to events, and giver	n to one of the			
Details of any dietary requirements						

PARENT OR CARER'S DETAILS DURING EVENT (at least two numbers)							
Name							
Phone No.		Mobile No.					
IF PARENT OR CARER ISN'T AVAILABLE, PLEASE CONTACT (at least two numbers)							
Name							
Phone No.		Mobile No.					
FAMILY DOCTOR							
Name							
Phone No.							
Address							
Can your child take paracetamol (Panadol)?							
Any other information you think the organisers should know?							

CONSENT

I give conser	nt for my child			to take part in the listed activities.			
I do / do not agree to any emergency treatment to be given, including emergency transport, as considered necessary.							
NB: The medical profession takes the view that a parent's consent to medical treatment cannot be delegated to another. Medical consent forms have no legal status and a doctor has the right to insist on parental consent before treating a child. We have found, however, that medical staff find this type of general consent helpful.							
I do / do not agree to photographs and short videos of activities including my child to be taken for use within the Church community and for possible publication, including newspaper or internet.							
We recognise that circumstances / information changes. It is my responsibility as a parent/carer to make the organisers aware so that changes can be made to the existing form or a new form can be completed.							
Name			Relationship to child	d (
Phone No.			Mobile No				
Signature			Dated				