

Fuse Academy@ 2nd Saintfield Presbyterian

This consent form covers from the 4th - 6th September including the trip on Friday Night to Dundonald Ice Bowl. It covers all activities onsite and offsite.

Need more information? Contact Rebecca: 07739897591/bexsmyth12@gmail.com

Anything written on this form will be held in confidence. The leaders need to know these details in order to meet the specific needs of your child.

I give permission for my young person to attend this event.

Child's full name: DoB:

Address:

Phone number where I can be contacted in an emergency:

Home: Mobile:

If unavailable contact: Name: Phone no:

Relationship to Child:

Name and phone number of GP:

Details of any known conditions, allergies etc (e.g. asthma, diabetes, epilepsy) and any medication being taken:

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Any other special needs, requirements or directions that would be helpful for the leaders to know about:

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I will inform the leaders of any important changes to my child's health, medication or needs and also of any changes to our address or to any of the phone numbers given above.

In the event of illness or accident, having parental responsibility for the above named child, I give permission for first aid to be administered where considered necessary by a trained first aider or for medical treatment to be administered by a suitably qualified medical practitioner.

If I cannot be contacted and my child should require emergency treatment, I authorise an adult leaders to sign on my behalf any written consent form required by the hospital. However I understand every attempt will be made to contact me as soon as possible.

During the time your child will spend with us, photographs may be taken for general church purposes and for this we need your permission. On signing this form we will assume you have given permission for your child's photograph to be taken unless otherwise informed.

I confirm the above details are correct to the best of my knowledge.

Signature: (Parent/Guardian) Date:

Name printed in full: