

**PRESBYTERIAN CHURCH IN IRELAND
STANDARD PARENTAL CONSENT FORM
Maze Presbyterian Church**

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.

Please circle the organizations attended by you child

JUNIOR YOUTH CLUB SENIOR YOUTH CLUB SUNDAY CLUB YOUTH FELLOWSHIP
OTHER

I give permission for my child to attend the organizations which I have marked above at their usual meeting places and to participate in all their activities.

Child's full name

Address.....

Date of Birth: Age:

Name by which young person is normally known:

Phone number where I can be contacted in an emergency:

Work: mobile:

If unavailable contact: Name:

Phone no (including code);

Relationship to Child:

Name and phone number if GP.....

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

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

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, if available, or medical treatment to be administered by a suitably qualified medical practitioner.

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

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

Signature: (Parent/Guardian)

Date:

Name printed in full.....

CONSENT – PHOTOGRAPHS

Please sign below if you grant permission for your child's photograph to be taken at the organisations activities. These may be used for general purposes within the Church, media, church website and other brochures and printed material.

I give my permission for photographs of the above named child to be taken and used in the manner described above.

Name _____ parent/guardian Date _____