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| **PARENT / CARER CONSENT FORM** | | | | | | | | | |
| This form is to be completed by a parent or carer of a child/ren or young person (under 18 years) wishing to attend parish activities or events.  It is to be used when a child or young person first joins the parish and is valid for the duration of their time at the parish. If circumstances change, it is the responsibility of the parent/carer to notify the parish as soon as possible.  *A Parent/Carer Consent Form is NOT required for Children’s Liturgy (held during Mass) as parents are present in Mass*. | | | | | | | | | |
| I give consent for | | | Child (1) Full name | |  | | Date of birth | | / / |
| Medical conditions, disabilities, allergies, phobias, special needs | | | | | | |
| Child (2) Full name | |  | | Date of birth | | / / |
| Medical conditions, disabilities, allergies, phobias, special needs | | | | | | |
| Child (3) Full name | |  | | Date of birth | | / / |
| Medical conditions, disabilities, allergies, phobias, special needs | | | | | | |
| Please tick: | | | | | | | | | |
| * Yes | * No | | to attend the activities/events listed below. | | | | | | |
| * Yes | * No | | I understand my child/ren may be photographed or filmed during Church activities/events and I consent to the use of such material within the Church community for promotional purposes only. | | | | | | |
| * Yes | * No | | I give permission for my child/ren to engage in online forums in accordance with the Safeguarding Guidelines. | | | | | | |
| * Yes | * No | | In an emergency, I give permission for medical assistance, including transport if necessary, and agree to pay for any expenses incurred. | | | | | | |
| Name of Activity/Event: | | | |  | |  | | | |
| PARENT/CARER | | | | | | | | | |
| Surname | | | |  | | First name | |  | |
| Address | | | |  | | | | | |
| Phone number/s | | | |  | |  | | | |
| Email | | | |  | | | | | |
| SIGN | |  | | | | DATE | |  | |
| ADDITIONAL PARENT/CARER or EMERGENCY CONTACT | | | | | | | | | |
| Surname | | | |  | | First name | |  | |
| Address | | | |  | | | | | |
| Phone number/s | | | |  | |  | | | |
| Email | | | |  | | | | | |
| RETAIN AT PARISH | | | | | | | | | |