

# Alton Runners Parental Consent Form

Event

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Day/date(s) of activity

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Location

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Type of activity/ what the child or young person will be doing:

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## 1. Child or young person's details

Name:
Home address:
Postcode:
Telephone number:
Date of birth:

## 2. Parent or carer's details

Name:
Home address:
Postcode:
Telephone number:

3.If there's an emergency, please contact (only fill in if different from the person named above)

Name:
Home address:
Postcode:
Telephone number:

4.Child or young persons medical details

GP:
Address:
Postcode:
Telephone number:

5. Do we need to provide any extra help, for example because of a disability, or are there any activities that your child cannot participate in?

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6. Do we need to know about any medical conditions or allergies? (If yes, please provide details of the condition(s) and any medications needed).

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Is there anything else you think we should know?

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## Information for parents and carers

Alton Runners aims to provide a safe and enjoyable experience for every child or young person.

To help us do this, please note the following important information:

- All questions on the consent form must be completed and signed by the parent or carer before any child takes part.
- Parents and carers must ensure they notify us of any changes to the information given on the form.
- We cannot take responsibility for any damaged clothing and/or personal items during the activity.
- Parents and carers should ensure children have sufficient water, food, clothing, sun lotion and medication (where appropriate) for the duration of the activity.

I agree to (please tick)

- My child taking part in the stated activity
- Alton Runners keeping a record of this form for health and safety reasons
- Any medical treatment that my child may need to be given in an emergency
- My child being filmed or photographed during the activity, with the possibility that these photographs/media recordings may be used for publications or marketing publicity. Alton Runners will take all steps to ensure these images are used solely for the purposes for which they are intended.)

*Note: if consent is not given, Alton Runners will not use any images taken during the activity that contain the child/young person.*

I understand that my child needs to follow the Junior & Young Members Guidance (available on our website) and any safety rules so that Alton Runners can keep them and other children safe.

Print name

Signature

Date

## Child or young person

I agree to (please tick)

- Taking part in the activity.
- Talk to a coach or welfare officer if I am not comfortable at any time during the activity so they can help me or arrange for me to do something else.
- Alton Runners keeping a record of this form so they have the information they need to keep me safe during the activity.
- Receiving any emergency medical treatment that I may need.
- Being filmed or photographed during the activity. I understand that the photographs of film might be used to tell other people about what Alton Runners do.

*Note: if I don't agree to this, Alton Runners will not use any images of me.*

I understand that enjoying the activity and being safe means I need to follow the Junior & Young Members Guidance (available on our website) and any safety rules

Print name

Signature

Date