

Consent form for children and young people residential holidays

Meadow Way Chapel, Hellesdon, Norwich

At Meadow Way Chapel we do all we can to protect the safety of your child. This is of foremost importance when on a trip or staying away. We need your support and consent which is why we would like you to fill in this form, which will remain confidential within the church leadership.

Church Name: Meadow Way Chapel, Hellesdon, Norwich

Church group(s):

The Trip/Residential Activity details:

Your child's name: Date of birth:

Your child's address:

..... Postcode:

Your name (as parent/main carer):

Your phone no: Day Night:

Name of an additional contact:.....

(Grandparent etc or other holding parental responsibility)

Their Phone No: Day Night:

Child's GP:

Child's GP Phone No: Child's National Health Number:

Details of any illness about which the leaders should be aware.

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Details of any medication required during the camp (all medication to be labelled correctly and clearly with name and dose needed each day)

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Details of any allergies or special diet

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Parental consent

In an emergency and/or if I am not contactable, I am willing for my child to receive necessary hospital or dental treatment including an anaesthetic

YES NO (Please tick)

Signature of parent or adult with parental responsibility Date:

NB The information part can be completed by a carer. Only those with parental responsibility (e.g. this does not include a foster carer) can sign the consent.

Meadow Way Chapel, Chapel Court, Hellesdon, Norwich, NR6 5NV

Church phone number: 01603 484784

Church web site: <http://www.meadow-way.org.uk>