



## **CONFIRMATION OVERNIGHT PARENTS INFORMATION**

**On SATURDAY 28th January, DRY is holding a Confirmation Fun Day in the Diocesan Centre, London Street, Londonderry from 11am – 9pm.**

The leader who will be in charge of your young person is ..... and their phone number is ..... They will be contactable throughout this event, however in case of emergencies you can contact the diocesan youth leader – Martin Montgomery on (+44) (0) 7812 050920 who will also have his phone on him at all times.

We aim to start the day at 11am and will finish by 9pm. Contact your rector about transport arrangements for your parish. We do plan to run some activities in the Foyle Arena (beside Ebrington Square). Fully supervised transport will be provided to and from the diocesan centre.

We would love for your child to attend this event and to enable this to happen we need you to complete the attached permission form. The essential details which you need to be aware of are as follows:

<b>TIME &amp; LOCATION:</b>	<b>28th January from 11am – 9pm</b>
<b>VENUE:</b>	<b>The Diocesan Centre, London Street, Londonderry</b>
<b>COST:</b>	<b>£10.00 / €10.00</b>
<b>PARISH LEADER IN CHARGE &amp; CONTACT NUMBER:</b>	.....
<b>DYO CONTACT NUMBER:</b>	<b>Martin Montgomery (+44) (0) 7812 050920</b>



## ACTIVITY / EVENT PERMISSION FORM CONFIRMATION FUN DAY

This permission form is for the Confirmation Fun Day in the Diocesan Centre, Londonderry on Saturday 28<sup>th</sup> Jan.

*A signed consent form is a condition of participation in this activity for those under the age of 18.*

Child's name .....

Age ..... Date of Birth .....

GP name and telephone number .....

Emergency contact number .....

I am willing for the child named above to participate in the above named event, and confirm that he/she is willing to participate as fully as possible. Yes  No

I am willing for the child named above to participate in the extra team activities in Foyle Arena. Yes  No

Furthermore, I permit the child named above to travel on transport that has been designated as official for the purpose of this event (e.g. minibus/coach/private vehicle). Yes  No

Finally I permit the child named above to appear in photos or film taken by a designated DRY photographer which may be used in publicity and on our website / Social media. Your child will not be named or made identifiable by any information we provide. *By consenting you are aware that others may tag your child on Facebook, which will then link to their personal Facebook account. In this instance you should ensure their privacy settings prevent others accessing their account.* Yes  No

Parent's/guardian's signature ..... Date .....

The child named above has the following medical condition(s) and requires the following medication (give details) and/or special diet:

I confirm that I have given my consent for my son/daughter to attend this event to be held on the date specified. In the event of he/she being taken ill or injured during this period, so that surgical operation or serum injection becomes necessary, I hereby authorise the leader in charge to sign on my behalf any written forms of consent required, provided that the delay necessitated to obtain my signature might endanger his/her health or safety.

Yes  No

Parent's/guardian's signature ..... Date .....

*Consent must be provided by the person with parental responsibility.*

**Failure to tick the appropriate boxes will be taken as permission being given for the relevant section.**