

ACTIVITY / EVENT PERMISSION FORM ON THE MOVE 2017

This is the permission form for ON THE MOVE 2017 – 5th July – 9th July 2017 in Eglinton Parish.

A signed consent form is a condition of participat	tion in this activity for	those under the a	ge of 18.		
Child / young person's name					
Age Date of I	Birth				
GP name and telephone number					
Emergency contact number					
I am willing for the child / young person named willing to participate as fully as possible.	above to participate	at OTM in Eglinton Yes	and confirm	that he/s	she is
Furthermore, I permit the child / young person r official for the purpose of this event (e.g. minibus		· ·	t has been de	esignated	as
			Yes	No	
Finally I permit the child / young person named photographer which may be used in publicity and			Yes	No	
Parent's/guardian's signature			Date		
MEDICAL					
The child / young person named above has the medication (give details) and/or special diet:	following medical cor	ndition(s) and requ	ires the follo	owing	
I confirm that I have given my consent for my sor in Eglinton. In the event of he/she being taken ill or serum injection becomes necessary, I hereby a forms of consent required, provided that the del health or safety.	or injured during the authorise the leader i	e period of this eve in charge to sign or	nt, so that su n my behalf a	rgical ope	eration n
			Yes	No [
Parent's/guardian's signature			Date		•••••
Consent must be provided by the person with parental resp	onsibility.				
Do you require food at £10 per person? If so please tick th	is box and include your m	noney with this form:			