

PARENTAL CONSENT FORM



To be completed on behalf of all under those under 18 attending activities at Min-Y-Don. Consent forms are required to enable under 18s to take part in activities.

Name of child: _____

Date of birth: _____

Dates of Visit: _____

Home Address: _____

Details of any known allergies: (e.g. paracetamol, antibiotics, any particular food or medicine): _____

Details of any medication needing to be taken during the visit: _____

Any other relevant information you feel it may be helpful for us to know about:
(i.e. Medical or behavioural issues which would be helpful for the Instructors to know about)

I give my permission for my children to take part in all activities at Min-Y-Don Christian Adventure Centre. I understand that these activities may include outdoor and adventurous sports such as: canoeing, rock climbing and abseiling.

pto >>>

I give my permission for first aid or medical treatment, including the administration of mild painkillers or ointments, to be administered if those responsible see this to be necessary.

I give my permission for my child to receive professional medical or hospital treatment, if necessary, including the administration of painkillers or anaesthetics.

My child has not to my knowledge been in contact with any infectious/contagious diseases and is quite fit and able to take part in the activities on the holiday.

I have supplied, to the best of my knowledge, all details regarding my child that I feel it would be helpful for those to know about.

I accept that Min-Y-Don cannot be held responsible for the loss of any personal effects incurred by my child, where reasonable steps have been taken to safeguard such effects, including money.

I recognise that my child must abide by the rules of Min-Y-Don and that these rules are there purely for my child's safety and the safety of other children.

Signed: _____
(Person with parental responsibility)

Please print name: _____

Date: _____