



# The Church Lads' and Church Girls' Brigade



## DAY OUTING PARENT'S CONSENT FORM

"The Brigade is committed to helping young people and children develop as balanced individuals without fear of physical, emotional or sexual impropriety."

**Company Name** \_\_\_\_\_

I have read the attached information and I give permission for my child

(name) \_\_\_\_\_

to take part in (activity) \_\_\_\_\_

Please state if your child has a disability, condition or dietary needs which might be affected by this activity.

\_\_\_\_\_  
\_\_\_\_\_

Please indicate details of any medical treatment she / he is having at the moment.

\_\_\_\_\_  
\_\_\_\_\_

I can be contacted during the event at

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Home: \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_

Should my child require emergency hospital treatment, I authorise the officer in charge of the event (name) \_\_\_\_\_ to sign on my behalf any written form of consent require by the hospital if I cannot be contacted. However, I understand that every effort will be made to contact me as soon as possible

Signature of the parent / guardian.

\_\_\_\_\_  
Date \_\_\_\_\_

Name of parent / guardian (capitals)

\_\_\_\_\_

**Note to leaders:** details of the event and a programme must accompany this form.

On the outing/visit the General Information and Parent's Consent Form (CF1) must accompany this form, as it contains important additional information.