



Parental Consent Form

Event:

Date:

Dear Parents/Guardians,

All young people under the age of 18 years must receive permission from their parent/guardian prior to attending any Young Farmers Activities/Events. Activities and Events may include; Outside Visits, Sport and Social Events as well as Competition. The club may also be involved in Devon County Events, Speaking Competitions, Farm Visits, Livestock Classes, Discos and Dances (most of which are included in the club programme). This consent form does not apply to Residential Trips, the South West Area weekend or National Events – additional permission will be obtained for these.

SECTION 1 - MEMBERS DETAILS:

Name:		Club:	
Date of Birth:			
Address:			
		Postcode:	
Telephone Number/Mobile:			

SECTION 2 - EMERGENCY CONTACT DETAILS:

1) Name:		Relationship:	
Address (if different to above):			
		Postcode:	
Numbers:	Home:	Work:	Mobile:

2) Name:		Relationship:	
Address (if different to above):			
		Postcode:	
Numbers:	Home:	Work:	Mobile:

SECTION 3 - IS YOUR YOUNG PERSON ABLE TO SWIM 50M Yes No

SECTION 4 - MEDICAL HISTORY:

Name of Doctor:	
Address:	
	Postcode:
Telephone Number/Mobile:	

Does your young person suffer from any reoccurring medical condition (within the last 12 months) which requires regular treatment?

YES / NO (If YES please provide details)

Does your young person suffer from any other illness?

YES / NO (If YES please provide details)

Is your young person allergic to anything?

YES / NO (If YES please provide details)

Please provide details of any medication to be taken including frequency and any relevant side effects:

Please include any other relevant information that may affect your young person:

SECTION 5 - PHOTOGRAPHIC INFORMATION

Do you consent for the Devon YFC to use photographs, videos or photographic images of your young person? This could include printed and online digital sources such as magazines, videos and digital media?

YES / NO

Are you happy your young person's name to accompany an image in printed publications and Digital Media?

YES / NO

I have provided the required information and hereby give my consent for

(Insert name of young person) to participate in the activity/event as stated above.

Signature of Parent/Guardian: Date:

The above medical information is correct as far as I know. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the chairman/club leader acting on behalf of the club to hospitalise and/or treat my son/daughter, including proper anaesthesia, injections or surgery.

Signature of Parent/Guardian: Date: