

Parental Consent Form

Urban Saints' Group Membership 2019-20



This Form should be completed by the child's parent or other adult with delegated parental responsibility. Good practice is to renew Consent Forms annually so that the data held is up-to-date; Urban Saints will therefore require a new Form to be completed for 2020-21.

Name of Group: **Dormansland Urban Saints**

SECTION 1 – this data will enable us to contact you should we need to and provide the best possible care for your child during normal Group meetings.

Name of child:

Date of Birth:

Home Address:

Postcode:

Name(s) of parent(s) or other adult(s) who have delegated parental responsibility for the child:

If the child does not live with the parent(s) or other adults(s) with delegated parental responsibility, with whom do they live?

Name:

Relationship to child:

Contact phone numbers for parent or other adult with delegated parental responsibility:

Day:

Home:

Mobile:

Contact email:

Name of family Doctor:

Practice Address:

Phone number:

Please give details of any health problems, medical conditions or allergies affecting your child, medication they are taking or additional needs that may affect normal activity:

I give permission for sticking plasters to be used on my child when necessary: YES NO

We will contact you, using the details you have given above, to keep you informed about our Group activities.

In addition, you can also opt in to receive information about Urban Saints' nationally. Urban Saints will respect how often you are contacted, and you can amend your choices at any time by emailing them at email@urbansaints.org.

Please indicate below if you would like to receive general information from Urban Saints:

By email: YES NO

By post: YES NO

By phone: YES NO

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SECTION 2 – this data will help us in planning our programmes and activities.

School your child attends:
Church your child attends (if any):
Your child's interests and hobbies:

SECTION 3 – to be read and signed only by a parent or other adult with delegated parental responsibility, and your child if aged 13 or over at the time of completing this form.

- By signing below, I apply for my child to become a Group member of Urban Saints and acknowledge that they will become a member on receipt of this form by Urban Saints.
- I give permission for my child to take part in the normal weekly activities of their local Group. I understand that the leaders will take all reasonable care in looking after my child, but they cannot necessarily be held responsible for any loss or damage to property.
- In an emergency, if I cannot be contacted despite all reasonable attempts to do so by the leaders, I give permission for my child to undergo emergency medical/dental treatment including the use of anaesthetics as considered necessary by the medical authorities.
- I give permission for Urban Saints to process the personal data given on this form for use in relation to my child attending the local Group, taking part in other activities with the Group regionally or nationally and for use in safeguarding records.
- I understand that Urban Saints will never sell or swap our data with another organisation and will store our details securely, respecting our trust and privacy as detailed in its full Privacy Policy: www.urbansaints.org/privacypolicy

Signature: Parent or other adult with delegated parental responsibility	Date:
Please print your name:	

Signature: Child, if aged 13 or over*	Date:
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- Please tick below if you consent to the local Urban Saints' Group leadership team contacting your child in relation to Group activities (as explained in the information sheet for parents) using:
 Email SMS Text / mobile call Social media (we abide by the minimum age restrictions in force)
- I am happy for Urban Saints to include my child in photographs and/or videos taken at Group activities. These may be shared with the Group or used in future publicity or other material produced by Urban Saints:
 YES NO

Please note in the box any limitations regarding photos/videos and/or electronic communication that you would like us to comply with, and then sign below:

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Signature: Parent or other adult with delegated parental responsibility	Date:
Please print your name:	

Signature: Child, if aged 13 or over*	Date:
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* Young people aged 12 may sign these sections retrospectively when they become 13 or may wait until the Consent Form is renewed.