



Parental Consent Form

To be completed for all young people engaged in angling activities outside of their normal club venues eg. When attending international competitive events

Name of Club/NGB:		
Childs Surname		
Childs Forename(s)		
Any forename, surname or maiden name previously known by:		
Date of birth:	Age:	Gender:
Address including full postcode:		
Home Tel. No:		
Email address:		

Details of activity (date, times, venue's):

EMERGENCY CONTACT INFORMATION
Emergency contact name:
Emergency contact number:
Alternative emergency contact name:
Alternative emergency contact number:
My childs doctors name and contact number:

MEDICAL INFORMATION

1. Does your child experience any conditions requiring medical treatment and/or medication?

YES NO If yes please provide details:

2. Does your child have any allergies?

YES NO If yes please provide details:

3. Does your child have any specific dietary requirements?

YES NO If yes please provide details:

4. Please provide any further information you feel is necessary:

Declaration

1. I have read and understand the content of this form and declare that to my knowledge all the information given is accurate.
2. I consent to my child taking part in the activities/event as detailed.
3. It may be necessary in certain circumstances for a member of staff accompanying your child to have the necessary authority to authorise any urgent treatment which may be required. I give my consent for any medical or surgical treatment recommended by a competent medical professional, where in the doctor's medical opinion a delay in seeking my permission will be contrary to my child's interest.
4. I am aware of the types of activities likely to be undertaken and consent to my child's participation. I acknowledge that the club will be liable in the event of an accident only if they have failed to take reasonable steps in their duty of care for my child. I understand that the accompanying adults have a common law duty to act in the capacity of a reasonable prudent parent.
5. I am aware of the clubs/NGB's rules, policies and code of conduct and acknowledge the need for my child to abide by these conditions at all times. Failure to do so may result in sanctions being applied. In the event that such action involves expense, I accept a responsibility to meet any such costs reasonably incurred.

Parent/Carers Signature:

Print Name:

Date:

This form or a copy of the form MUST be taken by the person in charge of the activity/event