## **Parental Consent Form**



Date Day/Month/Year			
Location of event			
1 Single line	about the	event	
2 Personal d	 letails		
Name of participant			
Date of birth Day/Month/Year			
Parish/School			
Name of group leader			
Additional information			
3 Emergency	y contact		
Name			
Relationship			
Contact number			

4 Details of trip						
h might be used at a later date for promotional purposes. If blease tick here:	:					
Date						
	please tick here:					