

Consent for Regular Activities & Photographs

Church of England, Diocese of Derby, parish of _____

Name of the group: _____

Where and when we normally meet: _____

How often: _____

Leader's name: _____

Leader's contact address: _____

Leader's contact phone number: _____

(This form should be filled in annually and kept in group records)

- I consent to the child named above taking part in the regular activities of this group. I understand that separate permission will be sought for any other activities.
- I consent to the leaders making appropriate transport arrangements for my child.
- In emergency I authorise the leaders to sign any written form of consent required by the medical authorities.
- I consent to my child's photograph being taken (with their verbal consent) for use in reports and on church internet sites.

(Please cross out this box if you do not consent.)

This consent form is valid for one year from today.

Signed _____ Parent/Carer/Adult or Guardian

Date _____