

PARENT / GUARDIAN'S CONSENT FORM

This form should be returned to the Guider on or before \_\_\_\_\_ (date).

I have noted the arrangements and I give permission for my daughter / ward:

\_\_\_\_\_ (name)  
of \_\_\_\_\_ (unit)

to take part in the Durham North Centenary Camp and enclose a non-returnable deposit of £20.

Balance of £55 to be paid by March 2010

Please state if your daughter / ward has a disability or condition that might be affected by this activity \_\_\_\_\_

\_\_\_\_\_

Please indicate if she has any faith or cultural needs e.g. dress, diet, toilet arrangements. \_\_\_\_\_

Please indicate details of any medical treatment she is having at the moment \_\_\_\_\_

\_\_\_\_\_

I give / do not give permission for photographs or videos of my daughter/ward to be used in Guide Association publicity or publications. In an emergency you should contact the following person:

Surname \_\_\_\_\_

First names \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Postcode \_\_\_\_\_

tel.daytime \_\_\_\_\_ .tel: evening \_\_\_\_\_

I give permission for any emergency dental, medical or surgical treatment, including anesthetic, as considered necessary by the medical authorities present

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Signed \_\_\_\_\_

Parent / guardian

Date

Cheques to made payable to 'Durham North Guide Association'

