



Parental/Carer Consent Form

Please complete this form and bring it to the first session/party your child attends. All information will be treated with the strictest confidence.

Child's Name:

Age:

Medical Conditions or Allergies

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Emergency Contact Details

Name:

Address:

Telephone:

Mobile:

Email:

I understand that there are risks associated with these activities, which have been risk assessed by Wild Outside, who follow a strict code of practice when working with children.

I understand that activities may include, walking, running, outdoor gym, craftwork, pond dipping, tool use, lighting skills, den building, campfire cooking and other related activities.

I give my consent for the equipment and tools necessary for the activity to be used by the young person mentioned above.

In an emergency, I understand that every effort will be made to contact me, but I consent to any medical treatment required.

Wild Outside leaders cannot take responsibility for any property which may be lost or damaged during sessions, and therefore we recommend that any mobile phones or valuable items are not brought to the sessions.

I (name)
give my consent for my son/ daughter (name)
to take part in Wild Outside activities.

We may from time to time, use photographs taken during Wild Outside sessions for publicity purposes.

I DO/DO NOT give permission for photographs to be taken of my son/daughter.

Signed **Date**