The Lifeboat Fellowship Children's Hour

Consent Form 2022 - 2023 (one per child)

(All information given is held in confidence and stored safely)

Child's Name	
Date of Birth	Age
Home Address	
	Postcode
Emergency Contact Number	ers:
Home	Mobile
If unavailable contact:	
Name	
Relationship to Child Medical Conditions/Allergens	
I give / do not give permis been organised by the Life	sion for my child to travel in transport that has boat Fellowship.
If not, who will normally co	llect your child?
contacted, consent for any	in-charge to give, on my behalf if I cannot be urgent medical attention. However, I rt will be made to contact me as soon as
Signature (Parent/Guardian	1)
Name (Printed)	Date

Please send the completed consent form with your child.