

PARENTAL CONSENT FORM – off site activities



for: YP name

Please complete the form below to indicate if you are happy for your son or daughter to take part in the following off site activities.

NB. Your child will be supported according to their Care plan, Risk Assessments and agreed staffing levels at all times

walking into town / local amenity	<input type="checkbox"/> yes <input type="checkbox"/> no
travelling in the minibus to an activity	<input type="checkbox"/> yes <input type="checkbox"/> no
visiting country parks / play parks / open outside areas	<input type="checkbox"/> yes <input type="checkbox"/> no
cinema/ theatre / pantomime / exhibitions	<input type="checkbox"/> yes <input type="checkbox"/> no
sporting activities e.g. swimming / bowling / gym	<input type="checkbox"/> yes <input type="checkbox"/> no
day trips e.g. zoo, seaside, London	<input type="checkbox"/> yes <input type="checkbox"/> no

<p>please list any off site activity that you would NOT like your child to take part in</p>	
---	--

Print name	
Signature	
Relationship to young person	
Date	