DIOCESE OF THE NORTHEAST AND MID-ATLANITC Parental Consent Form

(To be signed by Rector or Vicar at the end)

I confirm that I,	am the parent/legal guardian of
	.
	participating in the trip and activities of
	and undertake to inform the Vicar or Rector of the parish confirm that all details are correct and I am able to give cipate in all church-related activities.
I acknowledge that neither the pa supervision for my child except as set	rish nor the diocese is responsible for providing adult tout as follows:
Name of parent or guardian: (please pri	int)
Signature	Date:
	Contact Details
Name of Child	
Address	
Parent's Mobile Phone No	
Emergency Contact No. (1)	
Emergency Contact No. (2)	

Please also include all medical details that might be relevant in dealing in with your child in a safe manner, such as allergies, medication, special needs, etc.
Photographic & Video Consent
I consent/do not consent to the below mentioned child being included in any photographic or video material, in any publications/websites/social network applications which may be used for the purpose of documenting and highlighting their involvement in parish activities.
Name:
Age:
Signature:
Date:
Print Name:
State Relationship to child:
Phone No
Signature of Vicar or Rector: