West Monkton Parish Council

Youth Café Consent Form

I consent for my child _____ to take attend the Youth Cafe and to have photographs and videos to share on social media and use in West Monkton Parish Council publications about the project.

Signed _____ Date _____

Print Name _____

In addition, we need to know of any allergies or medical conditions that affect your child. Please list any allergies or medical conditions, including current medications in the space below.

If there is anything else you feel would be useful to share with us please use the space below.

We need to have the **address** and **date of birth** on file for each child that attends the Youth Café. Please can this be provided below:

Address:
DOB:

In case of emergency please list in priority order anyone we should contact.

Name and relation to child	Contact telephone number and address

If you have any queries or need any additional information, please do not hesitate to contact me on 07505 984006 or email community@westmonktonparishcouncil.gov.uk.