

# Parental Consent and Information Form for Summer Holiday Activities

Dear Parent / Guardian,

Please complete and return this form if you wish your child to take part in any activity or transport organised by Crediton Learning Community (activities or transport highlighted in yellow).

**The activity organiser cannot take your child on any activity or coach provided unless this form, correctly completed, is in his / her possession, no matter what the reason.**

- I would like my son / daughter to take part in the holiday activity (ies) mentioned overleaf and, having read the information provided agree to him / her taking part in any or all of the activities described.
- I consent to any emergency medical treatment required by my child during the course of the activity.
- I confirm that my child is in good health and I consider him / her fit to participate.
- I understand that the County Council will not be liable to him / her for any loss, injury or damage suffered other than such as may be caused by the negligence of the County Council or its employees.

**Please  
Complete:**

Name of child (block capitals)

Please note here any special relevant details that the activity leader ought to be aware of concerning your child's health or diet BUT which do not prevent him / her taking part, e.g. diabetes, asthma allergies, ADHD etc.

Name of Parent / Guardian (block capitals)

Contact Address

Home Telephone Number:

Mobile:

Email: (used for registration confirmation)

Signature of Parent / Guardian  
if agreeing to the above

Date

## Photographic Consent

I give my consent for my child to appear in photographs, which may be used in displays, leaflets, reports and websites as deemed appropriate by the Crediton Learning Community.

Signature of Parent / Guardian  
if agreeing to the above photographic consent

Date

# Booking Form for Summer Holiday Activities



Name of Child (Block Capitals)		Date of Birth		Age	
-----------------------------------	--	---------------	--	-----	--

Activity:		Location:		Date:		Time:	
Transport From:				Returning to:			
Payment enclosed for this activity: £							

Activity:		Location:		Date:		Time:	
Transport From:				Returning to:			
Payment enclosed for this activity: £							

Activity:		Location:		Date:		Time:	
Transport From:				Returning to:			
Payment enclosed for this activity: £							

Activity:		Location:		Date:		Time:	
Transport From:				Returning to:			
Payment enclosed for this activity: £							

Activity:		Location:		Date:		Time:	
Transport From:				Returning to:			
Payment enclosed for this activity: £							

Total payment enclosed: £ \_\_\_\_\_

**Cheques should be made payable to: QECC**

The form should be sent along with the full fee for all activities to: **Tessa Ryall, Holiday Provision Coordinator**, CLC, Queen Elizabeth’s Community College, Western Road, CREDITON, EX17 3LU or posted through the ‘FINANCE MAILBOX’ in visitors reception at Queen Elizabeth’s Upper School.

Unfortunately, we will be unable to provide receipts for every fee received but an email message will be sent or phone call made to confirm registration. Please phone or email Tessa Ryall if you have any queries (07966 930285 or t.ryall@queenelizabeths.devon.sch.uk).

If numbers are low for any particular activity it may have to be cancelled but anyone who has registered will be notified and the fee refunded (if payment received).

**VOLUNTEERS MAY BE REQUIRED FOR SOME ACTIVITIES – IF YOU ALREADY HOLD AN ENHANCED CRB DOCUMENT THIS MAY BE SUITABLE. ALTERNATIVELY, A NEW CHECK COULD BE MADE IF THERE IS TIME BEFORE THE EVENT. ONE CHILD BELONGING TO A VOLUNTEER CAN ATTEND THAT EVENT FREE OF CHARGE. (Contact Tessa for details).**