## Permission to take part in additional activities



A typical activity would be a ringing outing or a purely social event such as a meal

Details of the activity (a risk assessment is available for inspection)
Full name of young person
Date of birth
Mobile number (optional)
Is there anything we need to know? Medication / dietary restrictions / allergies / phobias / other?
Parent or Guardian's details and consent
Name
Address
Phone number Mobile number
Email address
Name and mobile number of alternative contact in case of emergencies
Permissions. Please indicate your permission for each
I give my permission for my child to take part in the activity described above
I understand what is involved and I am aware of the hazards present
My child will be brought to / collected from the group by a parent or known adult
My child has permission to travel with the group during this activity
My child has permission to travel to / from the group alone or as part of a friendship group
Photography permission
We may like to video / photograph your child at the tower. We follow national guidelines and only use first names for all under 18s in any use of photography. We only post on social media AFTER the event. These are to be used for the following purposes (please indicate your permission for each):
Training (videos will be deleted immediately after use / feedback has been given)
Publicity (parish publications, local press, Sussex County Association of Change Ringers publications, Ringing World)
Website (parish website and scacr.org)
Social media
Signature of parent or guardian
Date