

## Parent/Guardian Consent: Summer Slam 2018 July 2-6

YoungLife International complies with the data protection regulations GDPR. The data will be held confidentially and used for the administration of the Summer Slam 2018 and to contact you afterwards about future YoungLife International events and meetings.

Young	Person's	<b>Details</b>
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	Name of Young Person:	Date of birth:	
	Address:	Parent email:	
	Home telephone number:	Mobile telephone number:	
<b>)</b> (	etails of the Event		
	Open to all pupils P7-S6. £5 per day or £20 for all 5 days. We will meet daily at 12:30pm at Gregory Hall in Tayport, and finish at 5:30pm daily at the same place. There will be fun events planned, some in a different location, but all within walking distance. This "Summer Slam" Daycamp is hosted by Tayport Church of Scotland Parish Church and will be supervised by trained Young Life International and Church of Scotland leaders and staff who have appropriate background checks. Pupils should be dressed in clothes they can be active in and come with any needed medical items (inhaler etc). For more info about the vision of Young Life International visit ylinternational.org. Spaces are limited so please sign up as soon as possible by returning this form to any Young Life leader or to front office at Kilrymont Campus. Send any questions by email to FifeYoungLife@Gmail.com		
Contact Details for Parent/Carer			
	Name of Legal Parent/Carer:	Relationship to Young Person:	
	Home telephone number:	Mobile telephone number:	
VI	edical Details		
	NHS Number: Name	e of Doctor:	
	Address of Doctor: Phone number of Doctor:		
	Please list any medical problems we should be aware of (include allergies and specific dietary needs):		
	Please give details of anything else you think we should know:		
giv Chu Chu e l Ve oth	The following section should be read and signed ONL's we my consent for the young person named on this form to take part in Summer angements. I expect the young person that I am giving consent for to behave it arch of Scotland leaders, and acknowledge that even though they will give the sheld liable for behaviour that leads to an accident or injury.  will be taking photographs and video of the young people as part of Summer's er fundraising and publicity material. Please add a note to this form if you DO in emergency, if I cannot be contacted, despite all reasonable attempts to do sidical/dental treatment, including the use of anaesthetics and blood transfusion	er Slam 2018. I understand the nature of the activities and the travel in a manner that will not cause concern to Young Life International or utmost priority to the safety of the young people in their care, they cannot slam, these may be used on the Young Life International website or in NOT wish your child's photograph to be used in this way.  o by the leaders, I give permission for my son/daughter to undergo any	
	Signature:	Date:	
	Name (in capitals):	Parent / Guardian of Young Person Named Above	