



Portcullis Jamboree Young Persons Health and Permission Form 25th to 27th May 2012

This section is to be completed by the Parent or Guardian of the young person named below. Please answer the following questions as fully as possible. As in the event of your child requiring emergency treatment, it will help the medical authorities in deciding which is the most appropriate treatment to give. (Please complete in BLOCK CAPITALS)

Surname	Date of Birth
Forenames	National Health Service Number
Parent/ Guardians Names	Date of last Tetanus injection

Parent/Guardians Address During the Camp Telephone Mobile	Family Doctors Name and Address Telephone
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Has the person been in contact with any infectious diseases within the 3 weeks prior to the event? YES/NO If yes please give details:
Any known allergies/sensitivities/Intolerances/dietary requirements Asthma/nuts/gluten free/dairy free/vegetarian/vegan/penicillin/plasters/other (please state)
Please give details of any medical conditions/treatment that leaders need to be aware of.
Date of last Tetanus injection?
Any other information that leaders need to be aware of?
My Son/Daughter can swim 25 metres YES/NO
Photos and video images of Scouts taking part in activities may be submitted to the local newspapers, the Group, District or County newsletters and website or put on display. Every attempt will be made not to identify individuals by name. If you have any objections we need to be aware prior to the event.

I hereby give permission for my child to attend the aforementioned Camp.

If it becomes necessary for my child to receive medical treatment and I cannot be contacted by telephone or any other means to authorise this, I hereby give my general consent to any necessary medical treatment and authorise the Camp Leader/Section Leader to sign any document required by the hospital authorities. YES/NO

I will inform the Section Leader if any of the information given on this form changes before the event takes place.

Name of Parent/Guardian	Relationship to Young Person
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Signature	Date
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Note: The medical profession takes the view that the parent's/carer's consent to medical treatment cannot be delegated. This view is explicit in The Children's Act 1989. Thus, medical consent forms have no legal status and a doctor or nurse insisting on the consent of a parent/carer to a particular treatment has the right to do so. For this reason we do not recommend that Leaders insist on parent/carers signing the statement above. However it can be a comfort to medical staff to have general consent in advance from parents/carers or to have a Leader on hand able to sign forms required by medical authorities.