

Consent form for Unaccompanied Minors

(Attendees under the age of 18 as at 30th January 2020)

This form gives consent for an unaccompanied minor to attend FurCoNZ (30th January to 2nd February 2020). This form is to be completed in conjunction with registration on the FurCoNZ website. Completion of this form alone does not constitute registration.

You and your parent(s)/legal guardian must have read, understood and agree to the Terms and Conditions of FurCoNZ.

Name:		
Date of Birth (Day /	Month / Year):	
Registration Type:	□ Full Registration (limite	ed to 16 or older as at 30 th January 2020)
	□ Day Registration (limite	ed to 14 or older on the day of attendance)
Please indicate any treatment and/or m		e staff should be aware of, and give details of the
	□ Asthma	□ Diabetes
	□ Allergies	□ Epilepsy
	☐ Migraines	☐ Other (give details)
	Treatment / medication	(also make note of any medication allergies or treatments not to be giver
		unces, allergies, eating disorders or special /egetarian, Gluten Free or Dairy Free)
Parent / Legal Guar	rdian Details	
Date of Birth (Day /	Month / Year):	
Relationship to Att	-	
Address:		
Primary Contact Ph	none Number:	
Alternate Contact F		
Email Address:	none Number.	
Eman Audress:		

Parent / Legal Guardian Notes

Attendee details

A copy of FurCoNZ Terms and Conditions is available on our website (www.furconz.org.nz/legal/), and will also be made available at the registration desk.

A completed online Registration and a signed Consent Form is required before we can register your child.

Upon receiving a completed Consent Form, a member of FurCoNZ Staff will contact you directly to confirm your consent has been given. Please do not presume your child has been accepted into FurCoNZ unless you receive confirmation from us. For Full Event Registration, completed Consent Forms must be received no later than the close of Registrations (16th January 2020). Failure to provide a complete Consent Form, that can be validated with a Parent or Legal Guardian, will result in the cancellation of Registration with a full refund.

For Day Passes, completed Consent Forms may be given in person, however this must be validated with a Parent or Legal Guardian before the attendee will be allowed on site.

FurCoNZ Consent

FurCoNZ cannot be held responsible for the actions or behaviour of your child. If you have doubts or misgivings about this, do not grant consent.

FurCoNZ will monitor the well being of your child while on site. Should the child need to leave site, the child must gain permission from FurCoNZ Staff in advance. FurCoNZ cannot be responsible for your child whilst off-site. In general we allow short trips to local shops, accompanied by either FurCoNZ Staff or adult attendees. If you wish us to decline all requests to leave site, please advise FurCoNZ Staff.

The information you provide will only be used for the purpose of running FurCoNZ. Personal details will remain confidential to FurCoNZ Staff and will only be given out to ensure the safety or well being of the attendee.

If, in an emergency, you need to contact your child you can do so by phoning 021 293 0200.

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Parental Declara	ation			
I give permission	for	to attend FurCoNZ.		
I have read, understand and accept both the FurCoNZ Terms and Conditions, as well as the Parent / Legal Guardian Notes (above).				
I understand that the attendee will be subject to the FurCoNZ Terms and Conditions, and that violation of those Terms and Conditions (such as unacceptable behaviour or wilful damage) will result in the attendee being sent home. Furthermore, I accept that Fees will not be refunded, and I accept responsibility for payment of any costs for transport or damage.				
I understand that certain inherent risks and dangers may exist in the activities in which the attendee will take part. I acknowledge that, while FurCoNZ and MiCamp make every reasonable effort to minimise exposure to known risks, some hazards and dangers associated with these activities cannot be foreseen or may be beyond the control of FurCoNZ and MiCamp.				
In the case of any emergency, and contact people are unavailable, I authorise FurCoNZ staff to obtain any medical advice and/or assistance that they deem necessary. Furthermore, I will accept responsibility for payment of any medical, transport or other related expenses.				
I confirm that the information given is true and correct, and I will advise FurCoNZ staff should this information change prior to the start of the event.				
Signa	ature of Parent / Legal Guardian	:		
		:		
Verified by (FurCoNZ Staff use only):				
Date:				
Please return co	ompleted consent form to:	FurCoNZ Committee PO Box 13846, Johnsonville, Wellington, 6440.		

Alternatively, consent forms can be scanned and emailed to: FurCoNZ@googlegroups.com Where a scanned copy is provided for verification, the physical copy must be presented at registration.