

**Active Schools and Sport Development**

**Child Application and Consent Form**

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| ***Activity Name*** |  | | |
| ***Activity Date*** |  | | | ***Activity Venue*** |  | |
|  | | | | | | |
| ***Child details:*** | | | | | | |
| **First Name** |  | | **Surname** |  | **Date of Birth** |  |
| **School** |  | | **Year Group** |  | | |
| **Address** |  | | | | | |
|  | | | | **Post Code** |  |
| **Phone** |  | | **Mobile** |  | **Email** |  |
|  | | | | | | |
| ***Emergency Contact 1*** | | | | | | |
| **First Name** |  | | **Surname** |  | **Phone** |  |
| **Email** |  | | | | **Relationship** |  |
|  | | | | | | |
| ***Emergency Contact 2*** | | | | | | |
| **First Name** |  | | **Surname** |  | **Phone** |  |
| **Email** |  | | | | **Relationship** |  |
|  | | | | | | |
| ***Medical Information*** | | | | | | |
| ***Name of Doctor*** | |  | | | | |
| ***Surgery Address*** | |  | | | | |
| ***Surgery Telephone Number*** | |  | | | | |
| Does the participant have any medical conditions that may affect their ability to participate in the activity?  Delete as appropriate:  Yes/No If Yes, please give details: | | | | | | |
| Does the participant have any additional support needs?  Delete as appropriate:  Yes/No If Yes, please give details: | | | | | | |
| Has the participant received a tetanus injection in the last 5 years?  Delete as appropriate:  Yes/No If Yes, please give details: | | | | | | |
| Is the participant taking any medication?  Delete as appropriate:  Yes/No If Yes, please give details: | | | | | | |

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| Does the participant have any allergies?  Delete as appropriate:  Yes/No If Yes, please give details: | |
| Has the participant suffered from or been in contact with any infectious/contagious diseased with the last 3 months?  Delete as appropriate:  Yes/No If Yes, please give details: | |
| ***Please note that LiveArgyll cannot be held responsible for the consequences of non-disclosure of information/changes in the participant’s medical condition or additional support needs. If the participant requires medication during the timescale of the activity but fails to bring it on the day, they will not be allowed to participate. No child can take part in an activity until we have received a completed consent form and payment.*** | |
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| ***Photographs - these may be taken during the activities for use in LiveArgyll publicity. No participant will be identified by name. If you do not wish photographs to be used in this way please email activeschools@liveargyll.co.uk*** | |
|  | |
| **Pick Up / Walking Home – Please delete as appropriate:** | |
| I will be collecting my child from the  appropriate pick up point | My child has my permission to walk  Home (8 years and above) |
|  | |
| ***Consent*** | |
| I consent to my child’s participation in the activities mentioned in this document.  To the best of my knowledge, my child is medically fit to participate in the activities. I undertake to notify LiveArgyll in the event of any change in fitness, health or additional support needs that my take place prior to the activities starting or during the block of activity/activities. In the event of a medical emergency I agree to my child receiving emergency treatment as considered necessary by the medical authorities present. I understand that if my child’s behaviour jeopardises their own safety or the safety of others they may be removed from the activity and any additional costs incurred as a result of their actions may be recovered from me. | |

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| --- | --- | --- | --- |
| Name (print) |  | | |
| Signature |  | Date |  |

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| **Privacy Policy** |
| *For Football Programmes, the information provided on this form will be shared with the Scottish Football Association for the purposes of monitoring participation in football and will not be used for any commercial purpose or shared with any third party organisations. To view LiveArgyll’s Privacy Policy please visit www.liveargyll.co.uk/privacy-policy* |

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| **Get Involved** |
| At LiveArgyll we are always looking for committed volunteers to help deliver our Active Schools and  Community Sports Programmes. By giving up as little as one hour a week you can make a huge difference in local sport. No Experience? No Training? No problem. All you need is an enthusiastic attitude and we will help with the rest. To find out more please go to our Volunteer Website at www.liveargyll.co.uk |

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