



Department
for Education



Holiday activities and food



Summer 2021 Holiday Programme

Section 1: General Details:

Full name of Child/Children 1:Date of Birth:

Full name of Child/Children 2:Date of Birth:

Full name of Child/Children 3:Date of Birth:

Full Address:

.....

Home Telephone Number:

Ethnicity of child/children:

Section 2: Medical Information:

Does your child suffer from any illness requiring regular medication/treatment? YES / NO

If 'YES' please give brief details of medication/treatment required. (If your child uses an inhaler, please state whether they are capable of using it independently or if they require assistance. Please note that inhalers must be brought in everyday or your child will not be able to participate in activity)

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Does your child suffer from any allergies e.g. allergy to specific food or medication? YES/ NO

If 'YES' please give details

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Special Dietary requirements:

We will be providing lunch; does your child have any special dietary requirements? YES / NO

If 'YES' please specify

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Section 3: Emergency Contact:

Doctors Surgery:Telephone:

Parents/Guardians contact telephone numbers in case of emergency are:

Emergency Contact Number 1:

Name: Relationship to child:

Work: Mobile:

Emergency Contact Number 2:

Name: Relationship to child:

Work: Mobile:

Please Turn Over

Section 4: Consent for young person to leave the premises

One of the main criteria for the funding received from Sandwell Council is that young people are free to come and go as they please.

Please tick the statement which best describes your consent:

- I give consent for my child/children to leave the provision freely (come and go as they please).
- Please contact me (parent/guardian) before my child/children leave the provision.
- My child/children are not to leave the provision until I have arrived to collect them

Section 5: Photography Consent

By ticking this box **I give my consent** for the above names to have their pictures taken. Please note that images of all young people will be used for promotion, monitoring or evaluation purposes.

Section 6: Consent for child to attend YCA Summer Holiday Programme:

I am the parent/guardian for the above named child/children and give my consent that they attend the Summer Holiday Programme organised by the Yemeni Community Association in Sandwell during the period 26th July – 19th August between the times 10:00am – 3:00pm.

I will inform the YCA as soon as possible of any changes in the medical or other circumstances between now and the commencement of the programme.

I acknowledge the need for him/her to behave responsibly throughout the programme and to follow any rules and instructions given.

I agree for the above named child/children to receive medication as instructed and any emergency dental, medical or surgical treatment including anaesthetic or blood transfusion as considered necessary by the medical authorities present.

Parent's/Guardian's name:

Relationship to child/children:

Signature: Date:

This form should only be signed by a parent or an individual who holds legal responsibility for the child concerned.