

PARENT/CARER CONSENT FORM FOR COVENTRY MUSIC EVENTS

EDVIS 12

This form should be read with the accompanying information/letter about the visit - all sections **MUST** be completed.

GENERAL INFORMATION

Ensemble/Project/Band Name: MASSED CHOIR Date(s) of performance: Tuesday 25th June 2019

Proposed Event/Performance (please tick):

- Summer Showcase 2019

I wish my son/daughter: _____ Date of birth: _____

to be allowed to take part in the above-mentioned performance and having read the information sheet, agree to his/her taking part in any or all of the activities described.

I understand that, while the establishment staff in charge of the party will take all reasonable care of the young people, they cannot necessarily be held responsible for any loss or damage suffered by my son/daughter during the visit. All visits are covered by public liability insurance and trips outside the City are usually covered by comprehensive travel insurance. Details of cover are available from the establishment on request.

MEDICAL INFORMATION

1. My child has a condition that may require medication during the event.

Yes No

If yes, give brief details: _____

Children must bring their own inhalers, epipens or other necessary medication with them – we will not be bringing anything stored in school as it is an outside of school event.

These can be given to Sam Adams, first aider on arrival, and they will be given back to you at the end of the concert.

EMERGENCY CONTACT

Name of parent/guardian: _____ Address: _____

Emergency telephone: (This should be a number we can contact you on at any time during the event)

Number 1 : _____ Number 2: _____

Alternative emergency contact should parents/guardians not be available:

Name: _____ Relationship to child: _____

Address: _____

_____ telephone: _____ mobile: _____

Collection arrangements for after the concert

My child _____ will be collected by _____

Relationship to child _____

Contact number for this person (if different to above) _____

Declaration

Having read the information sheet, and having understood the level of supervision to be provided, I agree to my child taking part.

I understand that all reasonable care will be taken of my child during the event/performance and that he/she will be under an obligation to obey all directions and instructions given and observe all rules and regulations governing the performance.

I understand that if my child seriously misbehaves or is a cause of danger to him/herself or to others, then he/she may be sent home early from the performance. In such a situation there will be no obligation on the school/establishment to refund any money.

I agree to my son/daughter receiving medication as I have instructed in this form and any emergency treatment

Full name of parent or carer (print please): _____

Signed: _____ Date: _____