

PARENT/ CARER/ GUARDIAN CONSENT FORM

Childs name:		
If there is any other relevant information that you please specify:	wish to provide regarding medical condition	ns, allergies etc,
		Please Tick
I have read and understood the above and agree In narrowboat activities with Megan and Tinks	to my child taking part	
I acknowledge the need for responsible behavious afety briefings and following instructions. I am a may involve remote supervision.		
1. In the event of an EMERGENCY, I agree to the necessary as advised by the appropriate emerge or Skipper.		
2. In the event of an accident, I agree to the pers the Skipper or Leader, who will have had approp		rst aid treatment from
Print Name:	Relationship:	
Address:		
Daytime Telephone Number:		
Evening Telephone Number:		
Mobile Telephone Number:		
Please specify an additional emergency conta	act.	
Print Name:	Relationship:	
Contact Telephone Number:		
Signed:	Data:	

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