

TOLBOOTH

COURSES + CLASSES

PARENTAL CONSENT & INFORMATION FORM

CHILD'S NAME _____

AGE _____

DATE OF BIRTH _____

ADDRESS _____

POSTCODE _____

EMAIL _____

PARENT/GURADIAN NAME _____

CONTACT TELEPHONE NUMBERS HOME/WORK/MOBILE _____

Does your child suffer from any illnesses/allergies that we should know about?

Yes No

If yes, please give details _____

CLASSES BEING ATTENDED

Age Group _____

Age Group _____

Age Group _____

DRAMA CLASSES ONLY - It may be appropriate to employ the use of specialist hyper-allergenic stage make up as part of this class.

I consent to the use of stage make up. Yes No

Images may be recorded during classes by Cultural Services staff for archive and publicity purposes.

I consent to this. Yes No

PLEASE NOTE THE FOLLOWING:

Parental Consent Forms must be returned before the day of the class.

Parents/Guardians should always accompany their child into the premises. Please ensure that you allow ample time when collecting your child and we request that you notify us if you are to be delayed at all.

Courses with insufficient numbers may be cancelled with 48 hours notice.

I understand that while staff will take all responsible care to ensure the safety of my child, they cannot be held responsible for any loss, damage or injury incurred while in their care.

I can be contacted on the above telephone numbers in the event of an emergency.

SIGNATURE OF PARENT/GUARDIAN

DATE _____