

**Scouts One Day Activity form
Information and Consent Form**

This part to be KEPT by the parent/guardian.

Please return the lower section of this form completed and signed to the Leader by

Name of Section:

Proposed Activity

.....

.....

On (Date)

At (Place)

Start Time: am/pm

Finish Time am/pm

Cost £.....

Cheques payable to:

**Parents or Guardian Consent
This part to be returned to the leader**

I have noted the arrangements and give permission for:

Name of Child

To take part in the proposed activity

.....

.....

.....

Please state if your child has a disability or condition which might be affected by this activity

.....

.....

.....

Please indicate details of any medical treatment he/she is having at the moment:

.....

.....

Is Transport required Yes/No

Additional information:

.....

.....

.....

.....

.....

Home Contact:

.....

.....

Home Contact phone:

.....

.....

Signed:

Leader

Date

I can provide transport (if yes please give details)

.....

.....

.....

I enclose a fee of £.....

I can be contacted during the day at:

.....

.....

.....

Tel No:

Mobile No:

Signed:

Date

Name:

I agree to my details being held on file Yes/no