

PARENTAL CONSENT FORM  
Please complete for each child under 18

**TO BE COMPLETED BY THE YOUNG PERSON'S PARENT/GUARDIAN**

<b>Name of the administrative body:</b> Summer School Committee of the Bahá'í Council for Scotland	<b>Name of Representative:</b> Ian Fozdar, John Huxtable
<b>Children's Class/Youth Group:</b> Assigned on arrival	<b>Event:</b> Scottish Summer School
<b>Venue:</b> Strathallan School, Forgandenny Perthshire, PH2 9EG	<b>Dates:</b> 29 July to 3 August 2017
<b>Full name of young person:</b>	
<b>Date of Birth:</b>	
<b>Home Address:</b>	
<b>Home contact numbers (landline/mobile):</b>	
<b>Contact number at Event:</b>	
<b>e-mail address:</b>	

<b>The above-named child has the following medical condition(s):</b>	
<b>Medication being taken or may need to be taken:</b>	
<b>Any other relevant information:</b>	
<b>Alternative Emergency Contact Details:</b>	Name: Telephone: Relation to child:

**PARENTAL CONSENT (PLEASE READ CAREFULLY & SIGN BELOW):**

- ❖ I am the legal parent / guardian of this young person
- ❖ I consent to the above young person regularly attending the group and participating in the activities organised by and under the auspices of the above-named Bahá'í administrative body; its representative named above has explained to me the nature and scope of the activities the young person may be engaged in
- ❖ I agree that you may exercise my parental responsibility for the duration of the group as you may consider reasonably necessary
- ❖ I authorise you to seek medical attention for my child as you deem necessary in case of emergency or concern
- ❖ I have been made aware that from time to time, additional teachers may conduct the group, and that these will always have obtained clearance to work with young people
- ❖ I consent to details of the group, including the name of my child, being kept confidentially in the Bahá'í records.

**PLEASE NOTE: Parents/guardians are entirely responsible for their child(ren)'s well-being at all times as tutors and the organisers will NOT be checking on their safety outside the formal group/class times.**

I object/do not object (delete as appropriate) to photography (still or video) of my child being used in publicity materials	
Signature of Parent/Guardian:	Date:
Name (printed):	

**For Registrar use only:**

Registration Group Name:	
Copy Passed to National Spiritual Assembly of the Bahá'ís of the United Kingdom	
Copy retained by Summer School Committee (until October 2017)	