



Northants Young Farmers' Clubs Annual Parental Consent Form

This form is to be completed by the Parent or Guardian of the member named below **who is under 18 years of age on 1st September 2019**. It gives consent for that member to attend and participate in YFC activities and the responsibility for the supervision of that member to the club/county officers, when the parent is not attendance. The Club or Northants County Federation will take responsibility for ensuring the safe running of all its events by working with the venue management, volunteers and staff. Members' attendance will be in accordance with the NFYFC or Northants County Federation Safeguarding Policy. In the event of an accident or concern arising involving a member under the age of 18, the Club or County Federation will liaise with the parent or the club/county officers. Details on this form will be held securely and will only be shared with volunteers, staff and other organisations that may need this information in order to meet the specific needs of your child. **Please use block capitals throughout the form.**

Section 1 – Details of under 18 year old member (*This section to be completed by the parent/guardian*)

Full name of YFC member:		
Address:		
Date of Birth:		
YFC Membership Number:		
Name of YFC Club:		
HEALTH AND WELLBEING INFORMATION		
Name of Doctor's Surgery	Address:	Contact Tel:
Name of the school or educational establishment Or state if the young person is home educated	Address:	Contact Tel:
Do you have any of the following?	YES / NO If yes, give details:	
Health conditions		
Disability		
SEN (Special Educational Needs)		
Allergies		
Other additional needs		
Dietary requirements		
Any other relevant information we need to be aware of (e.g. medication): Please give details.		

Northampton Town & County Federation of Young Farmers' Clubs

YFC Office, Moulton College, Lodge Farm, Pitsford Road, Moulton, Northampton, NN3 7QL

Tel: 01604 670562 email: office@northants-yfc.org.uk web: www.northants-yfc.org.uk

Registered Charity No: 304463



Section 2 – Photography Permissions *(This section to be completed by the parent/guardian)*

As part of the YFC activities, pictures and videos are used for the legitimate interest of the organisation which includes promotional activity and the publishing of competitions results. Official event photography and video from the event will include your child unless there are safeguarding or other reasons why you do not wish your child’s photograph to be used; please indicate this below. All events will display information regarding the capturing of images and who to speak to if there are any concerns during the event. No images will be sold but may be used for external press and news features. All images will be kept for use for a limited time and then only for historical and reference purposes.

	Please tick
I understand that my child may be photographed/filmed taking part in YFC activities and the resulting images or footage could be used by NFYFC in printed or digital (website and social media) format with their name accompanying.	
I would like to discuss my child’s photography permissions (you will be contacted by a representative of the Club/County)	

Section 3 - Information and Emergency Contact Details *(This section to be completed by the parent/guardians)*

The medical information overleaf is correct to the best of my knowledge and in the event of illness or accident requiring hospital treatment I understand that the responsible person at the event will make every effort to contact me. In an emergency, doctors/surgeons will make the decision regarding the necessary treatment without my consent. I have read and understood the attached information and hereby give my consent for my child to take part in this event. I understand that the YFC member insurance policy is available on request. I am aware that while the adults in charge of the event will take all reasonable steps to protect all participants from harm, they cannot necessarily be held responsible for any loss, damage or injury suffered during or as a result of the activity.	
Signed: (Parent/Guardian) Date:	
Full Name (Block Capitals)	
Do you have parental responsibility and/or legal guardianship in relation to this member? Yes / No	
EMERGENCY CONTACTS	
Name: (Parent/Guardian)	Tel (home): Tel (work): Mobile:
Name: (Parent/Guardian)	Tel (home): Tel (work): Mobile:

I understand that I have a responsibility to inform the Club/County Federation of any changes to this information. If this form is completed incorrectly or additional information is required the Young Farmers’ Club/County Federation will contact you to ascertain the relevant information.

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