

# SO8: Adult Consent Form for Transporting Children and Young People

In order to ensure the child's/young person's safety, we would be grateful if you would complete and return this form. Please let us know if there are any significant changes. A copy will be retained confidentially by the group leader.

## PARISH DETAILS

Name of Parish:

## ACTIVITY/EVENT DETAILS

Type of Activity/Event:

Dates to take place:

Venue/Destination:

Departure place:

Departure time:

Return place:

Return time:

## DETAILS OF CHILD/YOUNG PERSON

Name of Child/Young Person:

Date of Birth: (If under 18)

Address of Child/Young Person:

Postcode:

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## DETAILS OF PARENT/CARER

### Parent/Carer contact details

Name:

Address: (If different from child/young person)

Postcode:

Contact Telephone No:

Relationship to Child/Young Person:

### Additional responsible adult (in case of emergency)

Name:

Address: (If different from child/young person)

Postcode:

Contact Telephone No:

Relationship to Child/Young Person:

## TRANSPORT ARRANGEMENTS

Private car driven by:

Address:

Postcode:

Contact Telephone No:

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## PARENT/CARER CONSENT

**I AGREE** that the person named on this form has my permission to drive their car with the aforementioned child/children/young person(s) as passenger(s). Seatbelts will be worn at all times.

**I UNDERSTAND** that the driver will have a full and valid driving license and be fully insured. If this is a regular car journey, his/her insurance company will have been informed of the arrangements.

**Or;**

**I AGREE** that I/we are responsible for and drop off and pick-up of my/our child/young person.

Signature:

Date:

Print Full Name: