## Spree SW 2020 Parental Consent Form For young people aged 8 to 17 at the start of the event.





Spree SW 2020 takes place from June 26th to 28th at Westpoint Exeter. A signed Parental Consent Form is required for every young person attending Spree SW 2020 who will be 17 or under at the start of the event, including under-8s belonging to adults coming with a group.

SECTION 1 This data is required for us to process the YOUR CHILD'S DETAILS - if more space is required for the		Ū		rma	ation please	conti	inue	on t	he h	nack d	of th	nis form:	
Full Name			Male	_	Female	DC	Г		/	/		Age on Jun 26 <sup>th</sup> 2020	
Home Address													
Name of Family Doctor					Surger	y Pho	one i	no.					
Surgery Address													
Please give details of disabilities, allergies, medical condition	ns c	or die	etary r	equ	uirements o	of whic	ch th	ne gr	oup	leade	ers	should be aware:	
Please give details of any medication currently taken (including the dosage and whether self-administered):  Date of last anti-Tetanus in (If known)										Date of last anti-Tetanus injection: (If known)			
ACTIVITIES AT SPREE SW - see www.spreesw.org/activ A wide range of supervised activities are offered at Spree S' offered on a first-come, first-served basis throughout the we as many as possible to take part. Where applicable, activities site at www.spreesw.org/activities to see the full list of act then please list them below, or tick the box to show that the	W a eke es w tivition	and yound all will be es or	oung    thoug   run a   offer	peo gh t and r. If	ople aged 8 the organise I supervised there are a	ers made in the second and the secon	ay li uital tiviti	mit t	he n ualif	umbe ied st	er o taff.	f turns on some activities to allow Please visit the Spree SW web- OT wish your child to take part in  They may take part in	
												all the activities.	
PARENT'S CONTACT DETAILS:													
Full Name		Con	tact E	ma	ail Address								
Address during Spree If different from child:													
Contact telephone nos. During Spree: Day:		Eve	ening:							Mo	obile	э:	
<b>SECTION 2</b> To be read and signed only by a parent or the time of booking.	othe	er ad	lult wit	th c	delegated p	arenta	al re	spoi	nsibi	lity, a	nd i	the child attending if aged 13+ at	
I give permission for my son/daughter to take part in Spree S sleeping arrangements for their group.	W 2	2020	and I	und	derstand the	e natu	ire o	f the	acti	vities	tha	at will be undertaken and the travel/	
I understand that the leaders and those organising Spree SV be held responsible for any loss or damage to property durin								g aft	er m	ny sor	n/da	ughter but they cannot necessarily	
In an emergency, if I cannot be contacted despite all reason son/daughter to undergo emergency medical/dental treatment													
I give permission for Urban Saint and SWYM to process and SW and for use in safeguarding records. I understand that U store our details securely, respecting our trust and privacy as privacy/	Irbaı	n Sai	ints ar	nd (	SWYM will	never	sell	or s	wap	our o	data	with another organisation and will	
Because of the nature of the event, I understand that vide Attendance at Spree SW signifies agreement that photos/vid Urban Saints or SWYM*. (*Personal information is never disc	leos	take	n by t	the	organisers	may	appe	ear i	n fut	ure p	ubli	city or other materials produced by	
I understand that if my son/daughter grossly misbehaves at this event then the organisers may forbid them from further participation and require me to collect them at my expense.					Signature	Signature (parent or other adult with delegated parental responsibility):							
agree to pay for deliberate damage to property caused by my son/daughter.					Date								
I enclose payment of £ to cover the fee charged by m	-		•		Signature	(VOLIF	na ne	erson	if ac	ed 13	3 or a	over at time of booking):	
I understand that once Spree SW has received my child's be via their group leader then refunds cannot be made by Spre- the booking for any reason.		•			2.9	(,, 501	3 20		49	, 10	. 51 (	Date	