

Gloucestershire HAF Youth Pilot Pass

Parent/Carer consent form

Project Title: Youth Pilot Pass / Gloucestershire Holiday Activities and Food (HAF) Programme. Winter2023.

Please fill in the following form if you grant permission for your child to take part in this project and please complete and return to Mrs Christopher by FRIDAY 9th DECEMBER 2023. If your son/daughter is not successful gaining a place, this form will be shredded.

If you do not wish for your child to participate in this project, please do not respond to this request.

We thank you for reading the information about this project.

Yours sincerely,

Ben Ward

07889512644



Parent/Carer Consent Form

Your Personal Details:		
Title: e.g., Mrs, Mr, Ms etc.	Forename:	Surname:
Contact Phone number:		
Please confirm that you agr boxes next to each sentence	•	
I have read and fully understood all the information provided about the project.		
I understand that if I would lik contact Ben Ward on 07889		about the project, I should
I understand that I am free to withdraw my child from the project at any time,		
without having to give a reason	on and without prejudi	ce.
I agree to my child taking part	t in this HAF Youth Pil	lot Programme Winter 2023
I hereby give my consent for programme.	my child to be photogi	raphed and filmed during the
I understand that photographs and films may be included in reports shared with local authorities, the Department for Education, and the media.		
Name of child:		
Signature of Parent/carer:		
NAME IN BLOCK LETTERS:		
Date:		