



Safeguarding - Parental Consent To Travel Form

Full name of child	
Child's date of birth	
Full name of child's legal parent/guardian	
Address	
Contact phone number	
Contact e-mail	
Details of child's medical requirements, if any.	
Details of child's allergies, if any	
Name of chaperone	
Address of chaperone	
Contact e-mail and phone number of chaperone	
DBS number of chaperone and date of issue	
Membership number	

I _____ the legal parent/guardian of _____
 hereby give my consent for him/her to travel with _____ as his/her
 chaperone to (competition venue
 address) _____
 leaving (Date& time) _____ and returning on the (Date &
 time) _____. I understand that the named chaperone will act in loco
 parentis if required and will during the trip be responsible for the welfare and
 safeguarding of _____
 Signature of legal parent/guardian _____

Date _____ Witnessed by (Print name- _____)

Date _____ Signature _____