

PARENTAL CONSENT FORM

PART 1 - CHILD'S DETAILS

First Name: _____ Last Name: _____

Date of Birth: _____

Address: _____

_____ Postcode: _____

Relevant medical/other information (conditions requiring medication, allergies, dietary):

PART 2 - PARENT'S OR LEGAL GUARDIAN'S DETAILS

Name: _____ Relationship to Child: _____

Telephone Numbers: _____ Mobile No: _____

Alternative Emergency Contact:

Name: _____ Mobile No: _____

PART 3 - ACTIVITIES SPECIFIED

Name of Race: _____ Date of Race: _____

PART 4 - PARENTAL CONSENT

- (1) I consent to my child, whose details are set out in Part 1, taking part in this event as specified in Part 3 until the date I specify below.
- (2) I understand that road races are held in accordance with both the rules and safety requirements of UK Athletics and that activity are carried out in accordance with the UK Athletics Welfare Policy.
- (3) I accept the hazards involved in running and acknowledge that my child takes part in these activities at my risk. Although the organisers take primary responsibility for the safety of children in these activities, I confirm that I understand that they accept no liability to me for any loss or damage to my child or our property arising out of his/her participation, other than the organiser's liability for causing death or personal injury by negligence.
- (4) In the event of any illness/accident during these activities, I consent to any necessary medical treatment being administered to my child, including anaesthetics.
- (5) I give permission to take photographs of my child and give permission to use these images in publicity material. This might include (but is not limited to), the right to use them in printed and online media.

Signed: _____ (Parent/Legal Guardian) Date: _____