

Ellistown Community Cinema

Consent form for a child aged 11-18 to attend the cinema unaccompanied



(All children may attend, without a consent form, as long as they are accompanied by an adult)

All of the data given on this form will be held and used in accordance with our privacy policy (<https://www.threechurches.co.uk/privacy-policy.html>)

SECTION 1 – this information will help us provide the best possible care for your child, whilst attending, the cinema and to contact you should we need to do so.

Name of child:	Date of Birth:
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Address:	
Postcode:	Home tel. no.

Name, address and tel. no. of family Doctor:
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Name(s) of parent(s) or other adult(s) who have parental responsibility for the child: PLEASE INCLUDE A MOBILE TELEPHONE CONTACT NUMBER IF POSSIBLE.
Address if different to child's home address above.

Please give details of any health problems, medical conditions or allergies affecting your child, any medication that they are taking or any disabilities they have that may affect normal activity (use the back of the form if you need more space):		
<table style="width: 100%;"> <tr> <td style="width: 60%;">I give permission for sticking plaster to be used on my child when necessary</td> <td style="text-align: right; vertical-align: top;"> *YES / NO * Please delete as appropriate </td> </tr> </table>	I give permission for sticking plaster to be used on my child when necessary	*YES / NO * Please delete as appropriate
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SECTION 2 – to be read and signed only by a parent or other adult with parental responsibility.

- I understand that the leaders will take all reasonable care in looking after my son/daughter but they cannot necessarily be held responsible for any loss or damage to property.
- In an emergency, if I cannot be contacted despite all reasonable attempts to do so by the leaders, I give permission for my son/daughter to undergo emergency medical/dental treatment including the use of anaesthetics as considered necessary by the medical authorities.
- I give permission for my son/daughter to attend Ellistown Community Cinema on the dates and times as published (see: www.threechurches.co.uk) and to view films rated Certificate U or PG.

***I consent to my child seeing Certificate 12 or 12A** *Delete if not applicable or if your child is under 12

My son/daughter ***will / will not** be collected from the cinema. *Delete as appropriate

Name of person collecting.....

Signature:	Date:
Parent or other adult with parental responsibility	