

## **Rora Christian Fellowship Trust**

Rora House, Halford, Liverton, Newton Abbot, Devon, TQ12 6HZ

Telephone: (01626) 821746 (9am - 5pm)

Email: info@rorahouse.org.uk

### Parental Consent Form for Young People under 18 (as required by Law)

Camp Activity: **Rora Boys Camp 2022**

Dates: **Sat 23 - Fri 29 July 2022**

Young Persons Surname \_\_\_\_\_ Christian Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ NHS Number \_\_\_\_\_

Address \_\_\_\_\_

(incl. Post Code) \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Telephone Number (with code) \_\_\_\_\_

Emergency Telephone Number (with code) \_\_\_\_\_

Doctors Name \_\_\_\_\_

Doctors Address \_\_\_\_\_

Doctors Telephone Number (with code) \_\_\_\_\_

Allergies \_\_\_\_\_

He has / has not (delete as appropriate) been immunised against tetanus in the last 10 years.

Medicine Instructions \_\_\_\_\_

Special Diet \_\_\_\_\_

Does your child have any additional needs that the leaders should be aware of?

I agree to the leaders of the above named charity camp activity taking any action necessary in the case of accident / emergency / hospitalisation involving my young person during his / her camp / activity for that period. I give permission for my young person to take part in all planned and supervised activities and spending time on visits to local towns and resorts. Ages 10 - 14 to be in groups of not less than 3. Ages 14 - 15 to be in pairs. Group leaders being available at all times at pre-arranged meeting / first aid points. During the camp, a photographic record is kept of camp teams and events. These photos may be used in our Rora albums & brochures.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Relationship \_\_\_\_\_

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## Rora Boys Camp 2022 - Application Form

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

If this is your 1st year at Boys Camp and you have **ONE** special friend you would like to share a tent with, please state his name: \_\_\_\_\_

I have enclosed the following with my booking:

Fully Completed Application and Consent Form

Cheque for £20/£120 as appropriate, made payable to

"R.C.F.T. Boys Camp"

**OR** BACS Payment to "R.C.F.T. Boys Camp" Bank Account

A/C No: 02611713 Sort Code: 30-12-74

SAE or email address \_\_\_\_\_

for confirmation

Whilst The Rora Christian Fellowship Trust will make every effort and take every precaution to avoid the spread of coronavirus, we cannot remove all risk, so have adopted control measures to mitigate risks to an acceptable level.

I confirm I will test my son for coronavirus with a lateral flow test on Friday 22<sup>nd</sup> or Saturday 23<sup>rd</sup> July. If this test is positive I will not send my son to Rora Boys Camp.

I permit my son to attend Rora Boys Camp 2022

Signed \_\_\_\_\_ Date \_\_\_\_\_

Relationship \_\_\_\_\_

Please Note: Only one applicant per form. If applying for more than one boy, please photocopy this form.