Please find attached a copy of the consent form required for those attending Dorset Action Van visit on Monday 11 April. Please note wet.

weather arrangements. TRAINERS or PLIMSOLES please. Hope to see you there. Lesley.

## LODERS YOUTH CLUB/LODERS YOUNG PLAYERS

## PARENTAL CONSENT/MEDICAL FORM

Signed	Mr/Mrs/Ms	Date
	nation you feel could be of assista	
For which the following med	dication is, has in the past been, u	sed for treatment:
My son/daughter has the foll	lowing medical condition:	
• •	ion to sign for any emergency me able to sign the appropriate forms	•
•	n to the desirability of arranging is and that some of the activities are	
	ry reasonable care will be taken, the sibility for any loss or damage to king part in this activity.	
JOINT SPORTS EVENT W	RS YOUTH CLUB and LODERS ITH TRAMPOLINING AND OU if dry or at LODERS VILLAGE -9 pm for over 8's.	UTDOOR GAMES on
Date of Birth	Age	
i hereby give my consent for	ſ	

Contact Tel No for that evening:			
Name of Doctor	Tel No		
This form must be signed by the Parent or Legal Guardian			
Please return this form on the night. (No form – no add by a parent/guardian.)	mittance – unless accompanied		