



YHA Consent Form

Please complete this form for ALL participants and return to your school or group leader as soon as possible. A copy of this form must be brought to the trip and given to the hostel team on arrival.

This information is strictly confidential and will be retained by YHA for 5 year period. Please refer to the Guide to Consent for more information.

Medical information

Name of Hostel visiting: EDALE

Name of group or school: HARPURHEY ALTERNATIVE PROVISION SCHOOL

Start date of trip: 17-03-25

Name of participant:

Home address:

Postcode:

Emergency contact name:

Emergency contact relationship:

Emergency contact phone number:

Alternative emergency contact phone number:

Date of birth:

Gender:

Family doctors name:

Family doctors address:

Postcode:

Family doctors telephone number:

Have you/your child ever suffered from: (please tick those applicable)

Asthma Epilepsy Diabetes Heart condition

Have you/your child been vaccinated for tetanus? (If yes, please give the date of the last injection and if the booster dose has been given)

Do you/your child have any other medical condition requiring regular treatment or likely to make medical treatment necessary?

Do you/your child have any allergies?

Please specify any dietary requirements: (please tick those applicable)

Vegetarian Vegan Dairy/lactose intolerant Egg allergy

Wheat/gluten intolerant Peanut/nut allergy Fish/shellfish allergy

Other (please specify)

Medical consent

If the participant is under 18 years or age parent or guardian consent is required.

I agree to/I agree to my child participating in the residential trip and understand the nature of the activities undertaken.

I agree to/ I agree to my child receiving medical and dental treatment being given if required, including the administration of a general anaesthetic and to surgical operations in case of emergency, in accordance with the recommendations of a qualified medical practitioner.

Signed:

Date:

Relationship to child: (if applicable)

Evaluation

Evaluation consent is required from parents/guardians if the young person is under 16 years of age. 16 and 17 year olds can give their own consent, although parent/guardian consent is welcome in addition.

As part of the residential trip participants are asked to complete two short evaluation questionnaires. From time to time participants may be asked to participate in interviews or focus groups. These are to help YHA understand the difference it makes as a charity and whether young people benefited and enjoyed their trip. More information about evaluation is explained in the Guide to Consent and should be read before signing this form.

I agree to take part/I agree to my child taking part in YHA's evaluation studies and understand that the data collected will be anonymous (my child will not be identified) and will be used in accordance with YHA's Research and Ethics Policy.

Participant**Parent or guardian****Signed:**

Signed:

Name:

Name:

Date:

Date:

Relationship to participant:

Film and photography**If the participant is under 18 years or age parent or guardian consent is required.**

From time to time YHA undertakes filming and photography during residential trips. This is to help showcase the great times that young people have with YHA and the difference we can make as a charity. More information about film and photography consent is contained in the Guide to Consent and should be read before signing this form.

I agree to take part/I agree to my child taking part in YHA filming and photography projects and understand that the images/video footage will be used and stored in accordance with YHA's Privacy Policy and GDPR (General Data Protection Regulation).

I am/I am the parent/guardian and I am in full legal capacity to consent.

Signed:

Date:

Name:

Relationship to child: (if applicable)

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WeAreYHA



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We are YHA. Because where you go changes who you become stay | join | give | volunteer yha.org.uk