

PARENT/GUARDIAN CONSENT FORM for RAISED IN YORKSHIRE <<2023-2024>>

<<Allerton Grange School>>

Child's Full Name Class

Child's Home Postcode



I have read and understood all the information in the parent/guardian information sheet provided.



I confirm that my child **is not** immunosuppressed and does **not** have any severe bleeding conditions (e.g., haemophilia).



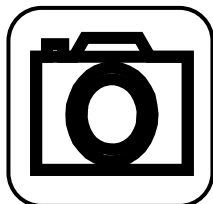
I agree to my child taking part in **RAISED in Yorkshire**

Signature: _____ Date: _____

Name of parent/guardian: _____

Relationship to child: _____

OPTIONAL - Please circle if you agree or disagree to the following:



I **agree / disagree** to my child being involved in photographs/videos taken by the Raised in Yorkshire team.