



NCCUK YOUTH CAMPING 2023

26 JULY – 28 JULY

HILL END, EYNHAM ROAD

OXFORD, OX2 9NJ

This form must be filled in by all adults and young people who are attending the youth conference. For participants under the age of 18, the form must be signed by their parent/carer. Participants over the age of 18, including adults and young people living independently, should sign the form on behalf of themselves.

Please provide the following details in respect of the PARTICIPANT

Full Name:

Date of Birth:

Home address including post code:

Mobile Phone Number (if applicable):

Participant's Doctor's contact details:

NHS number:

Doctor's Name:

Address including post code:

Telephone:

Give details of any medical conditions e.g. diabetes, epilepsy, allergies etc.:

Please give details of all current medical treatment, including medication:

Special Dietary Requirements (including food allergies):

Please provide the following details in respect of the NEXT OF KIN

Full Name:

Relationship to Participant (e.g. mother):

**Telephone (including
STD code):**

How should they be contacted in an emergency?

Home:

Work:

Mobile:

Home address:

Declaration of Consent

I acknowledge the receipt of and understand the information of the proposed youth conference.

- 1. I consent to the above named Participant taking part in the conference.**
- 2. I agree/do not agree (please delete as appropriate) that the staff on the conference can give permission for the Participant to have any medical treatment that medical authorities think necessary, including anaesthetic and blood transfusion. If agreement is not given the signatory/next of kin must undertake to be contactable at all times in the event of an emergency so that any responsibility for decisions affecting the participant can be made by the signatory/next of kin.**

Signed: Date:

Relationship to the Participant: