

Mountaineering Ireland Parental Consent Form

This form must be filled out by a parent / guardian for children less than 18 years.
Please complete this form and send it back to Mountaineering Ireland,
with your child clearly named in the document.

Young climber's Personal Details

To be completed by the Parent / Guardian

Name of young Climber:		
Age and Date of Birth:	Age:	D.O.B
Main Home Contact Address of Climber	Post Code:	
Evening Telephone		
Mobile number:		
Email:		
MI membership number:		

PARENT/GUARDIAN PERSONAL DETAILS

To be completed by the Parent / Guardian

Name of Parent:		
Complete the following information if different to that of climber		
Address:		
Work/day time tel:		
Mobile tel:		
Email:		

EMERGENCY CONTACT (IF DIFFERENT TO ABOVE)

EMERGENCY NAME:			
Relationship to Climber:			
Day-time tel:		Evening tel:	
Mobile tel:		Email:	

HEALTH DETAILS To be Completed by the Parent / Guardian

<p>Indicate specific health requirements. For which your child is receiving treatment. Include allergy, advice, asthma, diabetes, epilepsy. Include medicine being taken eg, penicillin, or which may need to be administrated, eg Epipen.</p>	
<p>Indicate any special dietary requirements:</p>	
<p>Indicate any special physical requirements:</p>	
<p>Child's Doctor's address:</p>	
<p>Telephone number:</p>	
<p>Do you give permission for your child to be photographed/interviewed or recorded during Mountaineering Ireland events* and used by Mountaineering Ireland for feedback & analysis; media opportunities; publicity of the sport; in print, on radio, on TV and on Mountaineering Ireland's website, social media and social networking pages?</p>	<p>Yes / No</p> <p>Signed: _____</p>

DECLARATION

To be completed by the Parent / Guardian

CONSENT & EVENT INFORMATION

This consent refers to all Mountaineering Ireland organised events* (e.g. competitions, coaching, workshops, training camps and outside climbing days and trips) that your child may wish to attend. This Consent will be kept on file by Mountaineering Ireland. We shall not ask for this information again for each event but any application will ask for changes of circumstance to be notified at the time.

If your circumstances change you must notify

youth@mountaineering.ie

Mountaineering Ireland Participation Statement:

Mountaineering Ireland recognises that climbing, hill walking and mountaineering are activities with a danger of personal injury or death. Participants in these activities should be aware of and accept these risks and be responsible for their own actions and involvement.

I confirm I am the Parent / Guardian of the above named child. I confirm I have read the 'Mountaineering Ireland Participation Statement' and attached code of conduct and am in agreement for him / her to take part in Mountaineering Ireland events I apply for. I confirm that the information supplied on this form is correct.

PARENT: _____ **Date:** _____

I have read the 'Mountaineering Ireland Participation statement' and am aware that the activity being undertaken has a risk of injury or death and that I must take responsibility for my own actions. I understand the need to behave responsibly and follow the Mountaineering Ireland code of conduct.

CHILD: _____ **Date:** _____

For office use only

Received by:

Date: