

Note: This form abbreviates 'Young Person' to 'YP'.
This refers to the CYZ member that this form relates to.



Carlisle Youth Zone

Victoria Place, Carlisle, CA1 1LR

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Junior's Parental Consent to Leave

My child can leave Carlisle Youth Zone without adult supervision (tick appropriate)

On All Visits

Sometimes

If you chose 'Sometimes', when can they leave on their own?

Please be specific & avoid using terms that are open to interpretation – for example, if the condition is "can only leave with friend", please give the full name of the person/s they can leave with. If the condition is "Light summer nights only" give a cut off point for when you no longer consider it a light summer night etc.

Declaration & Emergency Details

I give permission for (YP Full Name) to leave Carlisle Youth Zone without adult supervision as described above. I take full responsibility for my child once they have left the premises, even if they wish to leave before club finishes.

Adult's Name: _____

Relation To YP: _____

Address: _____

Phone: (Landline) _____

(Mobile): _____

Signature: _____

Date: _____

We will keep this form until your YP's membership needs renewed, at which point the consent will need renewed
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