**Parent Consent Form- Aloe Initiative**

**Name of Child** ………………………………… Date of Birth ………………………...……………….……

**Parent/ Guardian** ………………………………………………………………………………………......

Address: ……………………………………………………………………………………...…………………….
………………………………………………………...……........................… Postcode ………………………

Tel (day): …………………………….................. Tel (evening): ……………………….................…………
Mobile: …………………………………………………….. e-mail: ……………………………........................

**Emergency contact details:** (If different from above)
Name: ……………………………………………………………… Telephone no: ……………..…………
Relationship to child: ……………………………………………………………………………….................

**CONSENT** (please read carefully)

1. I agree to my child taking part in the activities of the Aloe Initiative
2. I consent to my son/ daughter travelling by any form of public transport, minibus or motor vehicle organised by the Aloe Initiative Team and Mentors to any event in which the program is participating.
3. I consent to my child having contact with their college mentor and participating in solo activities that the mentor gets prior approval from you and the Aloe team.
4. I agree to have contact with my child’s mentor to coordinate times for the mentor to meet with the child. Such meetings may include school events, local activities/events, and other pre-approved places.
5. I understand that the Aloe Initiative activities include a photography and film component in which my child will be both photographed and a photographer. I understand that these images will be part of a final exhibit, future Aloe Initiative programming, and press related to the Aloe Initiative

Signed ………………………………….....................… (Parent/ Guardian) Date: ……………………………