

Health & Consent Form

Camp 100

27 July - 6 August 2025

This consent form should be filled out by Campers (for those Under 18 should be filled in by parent/guardian). Lots of the Information will need to be uploaded into the Camp 100 booking system to be held centrally and some will be kept for group/village use.



Camper's Name	
Date of Birth	
Email (parent/guardian email for under 16s)	
Phone number	

Emergency contact information

Required for all participants; please supply an alternative emergency contact, if applicable

Main contact name	
Phone number	
Relationship to participant	
Alternative contact name	
Phone number	
Relationship	

Medical Information & Additional Needs

Required for all participants

GP/practice name	
Practice address	

Woodcraft Folk is a registered charity in England & Wales (1148195) and in Scotland (SC039791), and a limited company, registered in England & Wales (8133727).

Registered office: Holyoake House, Hanover Street, Manchester M60 0AS

Details of any disability, long-term or recurring health condition	
Details of any allergies (e.g. food or medication)	
Details of any prescribed or regular medication	
Details of any additional support or access needs	
Is there anything else organisers need to know/consider?	

Parental Consent

Required for all participants aged under 18

Participation in the activity:

YES NO

I have read and understood the activity information and hereby give my consent for the above mentioned child or young person to take part in Woodcraft Folk activities at the venue listed above and in the locality. I understand the extent and limitations of the insurance cover provided. I also agree that a similar activity may be substituted if changes to the programme are forced by safety, external events or weather conditions.

I agree to the information provided above being retained securely by group leaders and uploaded into the Camp 100 booking system, and understand it will be shared as necessary to safeguard a child, e.g. with a medical professional

In the event of an accident or emergency I consent to:

YES NO

A Woodcraft Folk leader/first aider administering any necessary first aid treatment

My child being taken to hospital and received any treatment necessary

Image Consent: I have permission for photos and recordings of this individual to be taken at the event and used by Woodcraft Folk. IFM and other external bodies for publications, social media and during the event on site.

YES NO

Only for campers age 12-17 Relations & Sex Education Consent: I have permission for this individual to take part in Relationship & Sex

Education workshops as part of Camp 100 MEST UP programme.
Everyone on camp will take part in a basic consent workshop, this
consent is for content above and beyond that. (policy)

Parent/guardian name	
Relationship to child	
Date	
Signature	