

## **Parent & Child Nature sessions - Parent Consent Form**

**Description:** I understand that the aim of these sessions is to promote positive mental health and wellbeing, and to support with improving self-confidence and self-esteem. I understand that my child and one parent will be offered the opportunity to take part in one of the following Nature sessions. They are able to attend multiple sessions if there is availability as priority will be given to new participants if your child has already attended one nature session.

1. Exploring the wild wood  
Waterworks valley.  
Fri 16<sup>th</sup> Feb ½ term  
1.30 – 4pm  
Meet in the carpark where the Toad used to be.
2. Meeting the wild trees of the world.  
Val de la mare reservoir  
Sat 24<sup>th</sup> Feb  
1.30 – 4pm  
Meet in the reservoir car park.
3. Walking the wild edges  
Francis le Sueur center. 5-mile road.  
Sat 2<sup>nd</sup> March  
1.30 – 4pm  
Meet in the car park of the Frances Le Sueur center.

I would like to attend session 1 with my child – Y/N

I would like to attend session 2 with my child – Y/N

I would like to attend session 3 with my child – Y/N

Name of person attending with child -

I would like to reserve spaces on the following sessions –

Session 1 – Session 2 – Session 3 (please circle).

**Confidentiality:** I understand that this course may be described in written and online publications but that no information will be provided that could identify my child. I give my consent for Mind Jersey to use anonymised artwork or quotations in promotional materials. The information collected as part of the evaluation will not identify my child, the data will only be captured to evidence the effectiveness of the support.

**Data:** I understand that Mind Jersey needs to keep records about people who it works with and provides services to. These records are held securely on Mind Jersey's computer systems and may include paper copy material. I understand that Mind Jersey shares information about service users with other agencies in their work where it is necessary to safeguard and promote the welfare of children and young people.

I, (insert name) \_\_\_\_\_, parent/guardian (circle) of minor child (insert name) \_\_\_\_\_, have read and understood the information sheet provided, have been given the opportunity to ask questions, and consent to:

- My child being supported to take part in a Nature session.
- For the information collected during my child's contact with Mind Jersey to be used anonymously for evaluation purposes

Name: \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

**Child's Details:**

Full Name:
Child's date of Birth:
School:
Year Group:

Reason for attending?
Please give information of your child's diagnosis. Please inform us of any triggers, sensitivities, anxieties or concerns your child may have in attending this nature-based workshop. Thankyou.

Any Allergies, medical conditions, mental health problems or disabilities? Especially if nature related.

**Parent/Carer Details:**

Name:

Relationship to the child:

Telephone number:

Email Address:

Name and telephone number of person to contact if you aren't available:

Any other information we should know?