



# Participant Consent Form

Participant name: .....

Accompanying Person's Name.....

Anyone else who is with participant:.....

The measures necessary to minimise the risk of the spread of infection need to be observed by everyone.

In preparation of getting started after lockdown...(Branch or Centre name)..... has:

. Ensured that all hard surfaces and equipment has been sanitised.

. Displayed signs on site to remind everyone of the need of social distancing and thorough hygiene regimes.

. Taken supplies of sufficient soap/sanitising products and disposable hand towels to allow regular hand washing.

By signing this form you are confirming that you are not considered to be clinically extremely vulnerable, acknowledging that (Branch or Centre) has taken all reasonable steps to reduce the risk of Covid-19 and agree to the following protocols:

- 1) You will ensure that you are not displaying any Covid symptoms requiring self-isolation, i.e high temperature or a new persistent cough, or living with anyone presenting these symptoms.
- 2) If symptoms are evident, for you or anyone in the household you will contact Little Brook to let them know that you will stay at home in line with government guidelines.
- 3) You will thoroughly wash or sanitise your hands on arrival.
- 4) You will endeavour to follow standard social distancing at all times.
- 5) If you fall ill, or display any symptoms during your visit, you will advise someone then return home immediately, avoiding touching anything where possible and follow advice of self-isolation.

Signature	Participant/parent/legal guardian	Date
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If consent has been given by the participant's parent or legal guardian:

Name	Relationship to participant
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