Irish Methodist Youth
& Children's Department
Skainos Square
239 Newtownards Road
Belfast, BT4 1AF
Northern Ireland

IMYC
Irish Methodist Youth and Children's Department

IMYC Reference:

UNDER 18s PARENT/ GUARDIAN PERMISSION FORM

APPLICANT DETAILS

Forename(s):

Surname:

Date of Birth:

D	D	/	M	M	/	Y	Y	Y	Y

PARENT/ GUARDIAN DETAILS

Forename(s):

Surname:

Relationship to Applicant

FATHER	
MOTHER	
GUARDIAN	

Current Address:

Line 1:	
Line 2:	
Line 3:	
Line 4:	
Line 5:	
Postcode:	

PARENT/ GUARDIAN CONSENT

I, being the Parent/Guardian of the above named applicant, consent for Access NI to conduct vetting in respect of the above named applicant. I consent to my child being checked against the barred list.

Parent/ Guardian Signature

Date

D	D	/	M	M	/	Y	Y	Y	Y

The Disclosure and Barring Service maintain lists of individuals who are barred from engaging in regulated activity with children or vulnerable adults. All posts necessitating an Access NI Enhanced check include a check of the Barred Lists.

It is an offence for an individual on the Barred Lists, or is the subject of a disqualification order from the courts, to apply for, offer to do any work, paid or unpaid, in regulated activity.

Anyone convicted of this offence is liable to punishment by imprisonment or fines, or both.

YOU MUST COMPLETE THE APPROPRIATE CHECK BOX ANSWERS AND SIGN THE CONSENT.

I, confirm I have read the explanation provided above, regarding the Barred Lists and understand the implications of making a Barred List check application.

Yes ☐ No ☐

I consent to a check being carried out, on behalf of my child, against the Barred Lists.

Yes ☐ No ☐