

**Sample 6**

**CONSENT FORM FOR MEMBERSHIP**

**PARENTAL CONSENT FOR MEMBERS UNDER 18 YEARS**

As a component of the St. John Ambulance Brigade, the Youth Program was established to give young people aged 6 to 20 the chance to join in the work of the St. John Ambulance Brigade. The Youth Program provides opportunities for personal development, as well as training for first aid, health care and safety skills through a range of activities and events. These may involve First Aid training, leadership training and work towards Cadet Proficiency Subjects.

**Please complete this permission form and the Medical Information Form in full and submit to the OFFICER-IN-CHARGE no later than \_\_\_\_\_**

Members 16 to 17 years of age not residing with a parent or guardian may sign as adults age 18+ years of age.

**I give permission for \_\_\_\_\_**  
(name in full)

**to be a member of the \_\_\_\_\_**  
(number and name of Division)

**as a St. John Ambulance Cadet/Junior and consent to him/her taking part in the Youth Program activities and events.**

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_  
(location) (month) (year)

\_\_\_\_\_  
(signature of parent/guardian)

\_\_\_\_\_  
(please print name here)

**If you have any questions or concerns contact**

\_\_\_\_\_  
(name and position) Telephone # \_\_\_\_\_

**CONSENT FORM FOR MEMBERSHIP**

**FOR MEMBERS 18+ YEARS OR 16-17 YEARS OF AGE  
NOT RESIDING WITH A PARENT OR GUARDIAN**

As a component of the St. John Ambulance Brigade, the Youth Program was established to give young people aged 6 to 20 the chance to join in the work of the St. John Ambulance Brigade. The Youth Program provides opportunities for personal development, as well as training for first aid, health care and safety skills through a range of activities and events. These may involve First Aid training, leadership training and work towards Cadet Proficiency Subjects.

**Please complete this permission form and the Medical Information Form in full and submit to the OFFICER-IN-CHARGE no later than \_\_\_\_\_**

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_  
(location) (month) (year)

I \_\_\_\_\_ hereby understand all the above  
(member's name)

**information and am willing to participate in the Youth rogram activities and events.**

**Signature of member \_\_\_\_\_**

**I have provided all necessary information to the member, and believe they understand all membership requirements.**

\_\_\_\_\_  
(name and position) Telephone # \_\_\_\_\_