**CHILDREN TAKING PART IN PUBLIC ENTERTAINMENT**

The children (performances) Regulation 1998 as amended

**Section 8**

Certificate of Health

I, give consent to the GP, to give out the below information regarding my child.

Name:

Signed: (Parent/guardian)

**To the GP:**

The child named below has been requested for performance/modelling work. In order to obtain his/her licence, please could you could complete the information below and return it to the parent/guardian.

Child’s name:

Date of Birth:

I, the GP of ………………………………………………………………………… confirm that it is my belief that the child above is fit & healthy to take part in performances (e.g. filming, modelling)

Comments:

Signed:

Print name:

Date:

GP Stamp:

**This document must be certified with the GP stamp**