



Parent/Carer agreement

Child's name (PRINTED)

Parent/carers name (PRINTED)

Please tick:

I have understood the information sheet accompanying this form.

☐

I agree for my child to attend sessions with Place2Be.

☐

Signed: (Parent/carers)

Date:

Signed: (School Project Manager / Place2Be Counsellor)

Date:

If you would like to talk about any part of this agreement, please tick this box ☐ and we will contact you.