



2024/25

<u>Sister Cities Youth Exchange Programme</u>

Parental Consent

- 1) My child has my permission to apply for and participate in the Sister Cities Youth Exchange programme.
- 2) I have read and signed the responsibility agreement.
- 3) Should my child be accepted for the Youth Exchange, I consent to my child's host family to act on my behalf in case of emergency, accident or illness on the basis that I am informed at the earliest opportunity.
- 4) I understand that should my child fail to act within the rules of responsible conduct (as outlined in the Participant Responsibility Agreement), they will be sent home and I will incur all associated expenses.
- 5) I confirm that my family and I understand that this programme involves hosting a youth ambassador from Gilbert, Arizona for 3 weeks in our family home. I confirm that I/we have the means and the space available for this to happen comfortably and safely, and can commit the time required to facilitate a youth ambassador accordingly.
- 6) I will ensure that my child will have an adequate amount of spending money available to take part in the programme.
- 7) I agree to not leave my child and the visiting youth ambassador alone overnight.
- 8) I agree to accompany my child and the visiting ambassador for any travel outside Northern Ireland.
- 9) I consent to photographs, videos and content of my child taken as part of this programme to be released on social media, online, used in promotional materials, publications, presentations, press releases and other associated communications.





- 10) I consent to background checks being undertaken for myself and all members of the household who are aged 16 or over. These checks will commence should your child be successful in their application, either as a confirmed OR a reserve candidate. Participation in the exchange is subject to satisfactory outcome of these checks.
- 11)I agree that all members of our household aged 16 or over will provide photographic identification in person to Antrim and Newtownabbey Borough Council at an agreed date and time to allow background checks to be undertaken.
- 12) I agree to attend any meetings or information sessions relating to participation in the programme and the associated roles & responsibilities.

I have read and understood this document and sign below to state that I consent to the above.

Signed:	
Print:	
Date:	