

Intergenerational Care Consent form

Name of Child(ren):	
Date of Birth:	······································
Emergency contact Name:	Number:
Milton Ernest Hall Care Home, to	se part in an intergenerational program with Penguin Childcare and o undertake activities such as (but not limited to); Planting flowers, games er egg hunt/croquet), making bird feeders/bug hotels, picnics, show and etc.
Yes □ No □	
•	cialising with the elderly community and that, at times, members will y child(ren) will have their temperatures taken and general well-ness ding of illnesses.
Yes □ No □	
	aken of my child(ren), that may be displayed on social media platforms e/ Majesticare and Penguin Childcare.
Yes □ No □	
Signed by:	
Signature:	
If you have any questions for Mil	ton Ernest Hall Care Home, please contact:

Lindsey Salhotra <u>activities.miltonernesthall@majesticare.co.uk</u>

