

NEUROSCIENCE, ETHICS, AND SOCIETY GROUP  
DEPARTMENT OF PSYCHIATRY  
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NEUROSCIENCE, ETHICS AND SOCIETY YOUNG PEOPLE'S ADVISORY GROUP

PARENT/CARER CONSENT FORM

I \_\_\_\_\_ (please print name of parent/legal guardian)  
give permission to \_\_\_\_\_  
(please print participant's name) to attend the Neuroscience, Ethics and Society Young  
People's Advisory Group (NEUROSEC YPAG) Open Meeting on the 25<sup>th</sup> of February 2017,  
13:00-15:00 at Wolfson College, University of Oxford.

*If his/her application to join the group is successful* I further give permission for him/her to  
take part in the YPAG and all associated activities (i.e. meetings/events/ work groups). I  
understand the commitment required of a NEUROSEC YPAG member, and I am aware that  
each member will be paid £25 in vouchers for each half-day meeting attended (except from  
the Open Meeting) and have his/her travel expenses reimbursed, as explained on this  
website: <http://begoodeie.com/resources/ypag/>.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

SPECIAL REQUIREMENTS

Please advise us if your son/daughter has special health (including medication and chronic  
conditions), dietary or mobility requirements.

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