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Virtual Reality and Retro Gaming Parental Consent Form

Where Fitness Meets Your Future

Dear Parent/Guardian,

As part of the Virtual Reality and Retro Gaming sessions, your child will take part in virtual reality (VR) games and activities designed to promote physical wellbeing and personal development. In particular, they will have access to *All in One Sports*, offering a fun and safe opportunity to try sports such as archery, basketball, darts, bowling, cricket, and more.

All VR activities are:

- Monitored by staff via live casting
- Equipped with 'parental' controls
- Limited to a maximum of 35 minutes per session with scheduled breaks

To ensure your child can participate, please complete the consent form below.

Child's Full Name: _____

Date of Birth: _____

Parent/Guardian Name: _____

Emergency Contact 1 Name: _____

Relationship to Child: _____

Phone Number: _____

Emergency Contact 2 Name: _____

Relationship to Child: _____

Phone Number: _____

Medical Conditions or Additional Needs (if any): _____

Photo-Sensitive Conditions Declaration:
I confirm that my child does not have any photo-sensitive conditions, including epilepsy or other conditions triggered by flashing lights or visual stimulation.

Consent Declaration:
I give permission for my child to take part in the Virtual Reality and Retro Gaming sessions, including supervised use of VR equipment and participation in multi-sport activities. I understand that all sessions are monitored and safety measures are in place.

Signature of Parent/Guardian: _____ Date: _____