Medical

Children Taking Part in Public Entertainment

The Children (Performances) Regulations 1968 as amended: Regulation 8

Re: _____ *(name of child)*

Date of birth: _____

(name of medically qualified person i.e. a GP, a practice nurse (with the GPs approval) or a paediatrician) (if having existing cause to examine the child) - BLOCK LETTERS please)

I _____

hereby certify that I have examined the above child and confirm that he/she in my opinion is fit to take part in performances (for example - film or television work, television commercials, stage appearances, etc.) and that his/her health will not suffer by reason of taking part in such performances.

Signed: ..... **Dated:** .....

Stamp

NB Normally this certification will last for up to six months unless deemed otherwise by the licensing authority.

Any cost/fees relating to this certificate are the responsibility of the applicant or the parents/carers of the child concerned.

Any relevant comments regarding the above child should be included below:

Please note this form will not be accepted unless it has been stamped by the doctors surgery.