

**Have your say – Consultation details**

We’re planning to hold a consultation about …………………………………..................................................... and we’d love your child to be involved.

**Name of Consultation**

**Date**

**Venue**

**Start time**

**End time**

**Travel arrangements**

**Person in charge with contact details**

We will provide light refreshments during the consultation.

If you would like your child to be part of this, please complete the Consent Form, sign it, and return it by *DATE*.