



Licensing and Business  
Milton Keynes Council, 1 Saxon Gate East, Milton Keynes, MK9 3EJ  
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**APPLICATION FOR A CHILD PERFORMANCE LICENCE**  
CHILDREN & YOUNG PERSONS ACT 1963  
CHILDREN (PERFORMANCES AND ACTIVITIES) (ENGLAND) REGS 2014

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## Medical Certificate

To be completed by the parent/guardian in capital letters

Child's Name	
Child's Date of Birth	
Name of Performance	
Dates of Performance	

To be completed by the Doctor/Surgery

**This is to certify that in my opinion the above named child's proposed employment will not be prejudicial to his/her health and physical development.**

Doctor's Signature .....

Date

Surgery Stamp/Address

**Note to parents, please return the completed certificate to the agent or person responsible for the production. Please do not return it directly to the Council.**