**Migrant Help Asylum Services**

**Consent Form - Third Party**

*(To be explained by an adviser and signed by the service user if they agree with the third-party agency to contact Migrant Help on their behalf)*

|  |  |
| --- | --- |
| **Name of main applicant:** |  |
| **Migrant Help Reference Number:** |  |
| **Port or NASS Reference:** |  |
| **Date of birth:** |  |
| **Address:** |  |
| **Named agency:** |  |

**I confirm that I give consent for the above-named organisation to contact Migrant Help to request the release of information, discuss my Migrant Help file and make requests/receive updates on my behalf.**

Signature of the main applicant:

Date:

Translated to client with the aid of an interpreter? Yes ❑ No ❑

**Registered address: Migrant Helpline Limited (trading as Migrant Help), Charlton House, Dour Street, Dover, Kent, CT16 1AT www.migranthelpuk.org Tel: 01304 203977 Email: info@migranthelpuk.org**

**Free asylum helpline: 0808 8010 503**

Registered Charity (England and Wales): 1088631. Registered Charity (Scotland): SC041022. Company No (England and Wales): 4172880. OISC Authorisation No. N200100480

