**SKIPTON PARISH CHURCH PRIMARY SCHOOL MULTI PURPOSE PARENTAL CONSENT FORM**

**The information on this form will be used throughout your child’s time school.**

**You may withdraw your consent to any of the sections, at any time,**

**by contacting the school.**

|  |  |
| --- | --- |
| Pupil Name | Pupil Date of Birth |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of P | arent/Carer | | Relationship to Child | |
| Address |  | |  | |
| Phone |  | Mobile |  | E Mail |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of P | arent/Carer | | Relationship to Child | |
| Address |  | |  | |
| Phone |  | Mobile |  | E Mail |

***Please indicate whether you have given your consent in each case by ticking the box on the right-hand side.* On-site activities**

|  |  |
| --- | --- |
| I give my permission for my child to use the internet in line with the school’s ‘Pupil Acceptable Use Agreement and Rules’ which are shown below:- |  |
| * I will only use ICT in school for school purposes * I will only open/delete my own files * I will make sure that all ICT contact with other children and adults is responsible, polite and sensible * I will not deliberately look for, save or send anything that could be unpleasant or nasty. If I accidentally find anything like this I will tell my teacher immediately * I will not give out my own details such as my name, phone number or home address. * I will not arrange to meet someone unless this is part of a school project approved by my teacher and a responsible adult comes with me * I will be responsible for by behaviour when using ICT because I know that these rules are to keep me safe * I know that my use of ICT can be checked and that my parent / carer contacted if a member of school staff is concerned in any way |  |
| View films and video clips rated PG |  |
| Take part in food preparation/cooking and tasting activities |  |

**Off-site activities -**

*I give my permission for my son/daughter to take part in:*

|  |  |
| --- | --- |
| Supervised visits to local destinations away from the main school site |  |
| Supervised one-day non-residential visits within the UK |  |
| Supervised off-site activities (for example sporting fixtures and swimming lessons) |  |

|  |  |
| --- | --- |
| **Medical consent –** *I give my permission for* |  |
| My son/daughter to be given first aid by a trained member of staff during any on-site or off-site activity |  |
| My son/daughter to receive urgent, dental, medical or surgical treatment, including anaesthetics, as may be considered necessary by the medical authorities present, during any on-site or off-site activity |  |
| My son/daughter’s information to be shared with the NHS and other relevant health professionals |  |
| A member of school staff to sign on my behalf any medical consent forms, if my child should require emergency treatment and I cannot be contacted |  |
| Outline any medical condition/allergy suffered by my child & any medication that would need to be taken during offsite visits | |

|  |  |
| --- | --- |
| **Emergency release -** *If I cannot be contacted in an emergency, I give permission for my child to be collected by* | |
| Name | Relationship |
| Address | |
| Contact number (s) |  |

|  |  |
| --- | --- |
| **Use of information and image (including photographs and video recordings) –** *I give my permission for my son/daughter’s:* |  |
| Work to be used in school displays and on the school website (names of children are never published) |  |
| Image to be used within school (e.g. in wall-mounted displays) |  |
| Image to be used in printed school publications (e.g. the school prospectus) |  |
| Image to used on the school website and in the local media |  |
| Image to be used in communication with international pen pals |  |
| Image to be taken by, or used in circulation to, other parents (e.g. school events) on the understanding that the image will not be posted onto social media websites |  |

*As a parent or carer I understand that I am not permitted to take photographs or make video recordings for anything other than my own personal use and will not distribute or post images online (this includes social networking sites such as Facebook and video sharing sites such as You Tube)*

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Signed …………………………………………………………………………….. Date ……………………

Relationship to Child ……………………………………………………………