



Telephone 01406 362383

Telephone 01406 363392

Interim Executive Head Teacher: Mr. Bill Lord  
Heads of School: Mr Ian Bland and Miss Diane Jacobs

**Consent Form 2017-2018**

Dear Parents

7<sup>th</sup> September 2017

At the beginning of a new school year we need to check that the consent forms we have on file for your child/ren, covering various activities in/out of school, are up to date. Rather than signing numerous sheets of paper, we have devised a single form which we hope covers all eventualities. Your help and speedy response in returning the completed form will be greatly appreciated.

**NAME OF CHILD.....**

**1) Local Walks**

It is necessary at times to take the children out of school to experience elements of the local area. These visits, whilst not frequent, form a useful part of their studies, giving first hand experience.

I/we give permission for my child to walk out into the village as and when it is essential to her/his studies.

**Signed.....Date.....**

**2) Photography and Video Recording - Staff**

Occasionally, a member of staff may need to photograph or video your child to digitally add their image to displays or work within school. These images are kept in school and are not used for any other purpose.

I/we give permission for my child to be photographed by a member of staff for school purposes only.

**Signed.....Date.....**

**3) Photography and Video Recording – Family/Press**

On occasions the school invites the local newspaper or known photographers (parents or grandparents) to take photographs at special, interesting school events such as plays, concerts and carol services. Your child’s name, their age and image may appear in the subsequent newspaper report.

I /we give permission for my child to be photographed by the press and for her/his name, age and image to be used.

**Signed.....Date.....**

**4) Medical Emergencies**

In the event of an urgent situation it may be necessary to contact either your child’s doctor or dentist.

I /we give permission for you to contact my child’s doctor and/or dentist if necessary.

Doctor’s name and telephone number.....

Dentist’s name and telephone number .....

**Signed.....Date.....**

**5) Food Allergies**

As part of our science, design and technology curriculum, over the course of the school year we will be tasting different kinds of foods.

I/we give permission for my child to take part in food tasting activities which form part of the school curriculum.

a) She/he can eat a variety of foods ..... (please tick if YES)

**OR**

b) Must not eat the following foods:.....

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**Signed.....Date .....**

**6) Internet Access**

The school gains Internet access through NETLinc - Lincolnshire County Council’s own point of presence service, and they provide software and firewall filtering to stop access to unsuitable or offensive material. We ask all pupils and their parents to sign an acceptable use agreement, which will be sent out as a separate document. The agreement gives a clear set of rules to be followed in order to avoid problems arising.

I /we give permission for my child to use electronic mail and the Internet at school under the correct supervision.

**Signed.....Date .....**

**7) Travel to Gedney Church End Primary School**

Occasionally children will join with our Federated school for joint activities at Gedney Church End Primary School. On these occasions a coach will be used to transport the children from one school to the other.

I/we give permission for my child to be transported to and from Gedney Church End when necessary.

**Signed.....Date .....**

**8) School Website**

The school has its own website for promotional purposes. We would like to occasionally use pictures of the children alongside their achievements. Children will not be identified by name.

I/we give permission for my child’s image to be published on the school website and understand that their name will not be published alongside their image.

**Signed.....Date .....**

9) Please could you give all your up to date contact details e.g. land line, mobile, work and emergency telephone numbers.

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10) Please could you give brief details of any current or past medical conditions that your child may suffer from, including medication.

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**Signed.....Date .....**

**11) Early Years Foundation Stage Profiles**

Children in the Reception class have electronic Tapestry profiles. This is a file that contains images and film that documents their learning across the year. On occasion, other children will be captured in these shots. All profiles are securely stored and will only be shared with the children’s parents.

I /we give permission for my child to be photographed/filmed for inclusion in our Early Years Profiles.

**Signed..... Date.....**

