

FOUNTAIN PRIMARY SCHOOL AND NURSERY UNIT PARENTAL CONSENT FORM

Child's Surname: _____ Forename(s): _____
Home Address: _____
Date of Birth: _____ Year of entry to School: _____
Home Telephone No. _____ First Contact phone number: _____
Family Doctor: _____ Telephone No: _____
E-mail Address: _____

This form will be used for all of the following activities during the child's time at Fountain Primary School.
A parent/guardian may update the form at any time.

CONSENT: ACTIVITIES

I give permission for my child (named above) to participate in special activities/excursions organised by the School

Signed: _____ (Parent/Guardian)

Date: _____

CONSENT: TRANSPORT

On an occasion where transport is required, do you give your consent for your child to travel in a

(a) Private car (e.g. football matches) YES/NO
(b) Bus/Coach YES/NO
(c) Minibus YES/NO

Signed: _____ (Parent/Guardian)

Date: _____

CONSENT

: PHOTOGRAPHS / VIDEOS

Please sign below if you give permission for your child's photograph to be taken in the normal course of School activities. These photographs may be used for general publicity purposes, in the media, on our school website, posters, brochures and other printed material.

I do* / do not* give permission for photographs of above named child to be taken and used in the manner stated.

I do* / do not* give permission for videos of my child to be taken.

***Please delete as appropriate**

Signed: _____ (Parent/Guardian) Date: _____

MEDICAL CONSENT

In the event of your child, named above, needing immediate medical attention at a Health Centre or Hospital the School will make all attempts to contact you. If we are unable to do so, please sign giving permission for your child to be accompanied by an adult from the School.

I give my permission for my child to be taken, if necessary to a health centre or hospital for diagnosis and treatment.

Signed: _____ (Parent/Guardian) Date: _____

CONSENT: USE OF INTERNET

The Classroom 2000 computer system has a very tight locking system which ensures that adults and children alike do not have access to any harmful materials. Please indicate whether you wish your child to use the internet to gather information for topic work. I give*/do not give* my permission for my child to use the internet under the supervision of an adult in school.

Signed: _____ (Parent/Guardian) Date: _____

CONSENT: CHANGING CLOTHES AND TOILETING (Children requiring assistance)

I give* / do not give* my consent to the staff of Fountain Primary School assisting my child at the toilet and changing his/her clothes should this become necessary for hygiene or comfort reasons.

Signed: _____ (Parent/Guardian) Date: _____