

Dear Parent / Carer

In an effort to streamline our administrative processes, we have made the decision to list all of our Parental Consents on one form which, once signed and returned to us, will be scanned in to our system and stored electronically, alongside your child's record. In addition to this, you will also receive the Parent / Carer Agreement. **PLEASE NOTE: Without your signature for this Agreement, your child will not be able to access any ICT provisions within the school, so it's imperative that you return the form prior to your child starting with us.** Once this electronic system is in place it will greatly reduce the administrative load and will result in fewer letters / forms being sent to you in the future.

Any subsequent updates to any of the procedures / consents that you have signed for will be published on our school website and notification will be sent via Parentmail – may I remind you that if you wish to withdraw your consent at any time for any of the items, for any reason, it is your responsibility to contact the school to advise us of this.

Please refer to the enclosed paperwork for further details of why we require the listed Parental Consents.

I, (print name in CAPITALS) hereby give my consent for the following items:

| Consent Type | Description | Please tick as appropriate | |
|--|---|----------------------------|----|
| | | YES | NO |
| Local Trips, inc. Sporting fixtures | Locally, within school hours, (e.g. Visits to the Plough, Torrington) and / or Sporting fixtures, outside school hours | | |
| Publicity – Use of Images <i>(TICK ONE BOX ONLY)</i> | Photos published with names | | |
| | Photos published without names | | |
| | NO publicity | | |
| Cashless Catering <i>(TICK ONE BOX ONLY)</i> | Biometric | | |
| | PIN number | | |
| Early School Closure | Student to be allowed home in the event of early school closure, due to heavy snow, for example | | |
| Emergency Medical | Consent for First-Aid trained staff and / or paramedics to attend to students in medical emergencies / use the defibrillator | | |
| Emergency Asthma Inhaler | Consent for school inhaler to be given, in the event of student not having their personal inhaler with them <i>(ONLY if asthma diagnosed)</i> | | |

Signed: (Parent / Carer) **Date:**

Yours sincerely

STUDENT NAME:



Jacqui Whiteman
Deputy Headteacher

Specialising In Sport And Applied Learning

