

Child's Name:

Class:

This permission slip will cover your child's time at English Martyrs' Catholic Voluntary Academy during the academic year 2020/21. Please also complete the reverse of this form.

Please tick **YES** or **NO** for each section:

|  | YES | NO |
|--|-----|----|
| <b>I consent to my child taking part in local walking outings during school time</b><br>This includes walking to St Francis Church (parents will be notified if transport is involved).  |     |    |
| <b>I consent to my child partaking in cookery/food tasting.</b>  |     |    |
| Has your son/daughter any allergies/intolerances?<br>ie: Food, Animal, Cream, Vegetation (if yes please list below)  |     |    |
| <b>I consent to my child's fingerprint being stored for the sole use of Junior Librarian.</b><br>This enables children to borrow books from the school library.  |     |    |
| <b>Photos/Videos in and around school:</b>   |     |    |
| <b>I consent to the use of my child's image in a display in school, that may be viewed by visitors to the school</b><br>An example may include a display in the school entrance or to recognise key events such as birthdays   |     |    |
| <b>I consent to my child being photographed for school group photos that may be purchased by other families who have children within the photo.</b><br>For example, a class photo, leaver's photo or school produced DVD collection of photos.                                       |     |    |
| <b>I consent for a professional photographer appointed and approved by the school to photograph my child and release the images to our family for sale.</b><br>Please note: the photographer would have possession of the photos on their equipment, not school equipment            |     |    |
| <b>School Trips</b>  |     |    |
| <b>I consent for school to take photographs of my son/daughter whilst on school trips</b>  |     |    |
| <b>I consent for school to take video and media footage of my son/daughter whilst on school trips</b>  |     |    |
| <b>Website and external publications:</b>  |     |    |
| <b>I consent to the use of my child's image on the school website, social media and Belinspirational (Chaplaincy website)</b><br>For example, to celebrate their achievements, taking part in an assembly or class activities, taking part in sporting events or school production.  |     |    |
| <b>I consent to the release of my child's name for publication, with or without an accompanying image such that they may be identified as an individual or part of a small group.</b><br>This may include the local press or media.  |     |    |
| <b>I consent to the use of my child's work on the school website.</b><br>For example a poster designed for an event, a piece of writing or artwork.  |     |    |
| <b>I consent to the use of my child's image (without their name) in the school brochure and in other printed publications/displays that we produce for promotional purposes.</b><br>An example could be a photograph of them in a general classroom scene with other students/staff. |     |    |
| <ul style="list-style-type: none"> <li>• Please note 'image' refers to photographic and video recording</li> <li>• Please ensure you have answered Yes or No to <b>all</b> of the questions then return to school.</li> </ul>  |     |    |
| Signed: .....Date: .....   |     |    |
| Print full name ..... Relationship to child .....  |     |    |

**Please list who has parental responsibility for your child**

Name of Parent/Carer:  
(with parental responsibility)

Name of Parent/Carer:  
(with parental responsibility)

I give permission for my child to go home with:

**End of day arrangements**

Please indicate below what is to happen at the end of each day

- B = Bus 517 (please include which stop your child will be getting off at)
- C = Collected (children will only be able to go with the person(s) indicated above)
- W = Authorised to walk home alone
- S = Schoolfriends club

Any variations to this should be confirmed to the class teacher in writing in the home/school diary

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--------|---------|-----------|----------|--------|
|        |         |           |          |        |

Signed:

Date:

**If in the future you wish to change any of the consents, please ask the class teacher for another of these forms.**