



**Parental Complete Consent Form 2018-19**

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**Section 1**

**Contact and Care (separate consent may be sought for out of the ordinary events)**

Name of child:	Date of birth:
Address:	Home phone number:
Post code:	
<b>Information from parent/guardian</b>	
Name:	Relationship to child:
Tel:	Email:

**Medical Information**

**Include further details below\***

- Yes  No Does your child have any allergies, phobias or medical conditions?
- Yes  No Does your child carry medication on a permanent basis?
- Yes  No Does your child have special educational needs or a disability?
- Yes  No Does your child have any special dietary requirements?
- Yes  No I give permission for basic first aid to be given to my child when necessary.
- Yes  No In an emergency, if I cannot be contacted despite all reasonable attempts to do so by the leaders, I give permission for my child to undergo emergency medical/dental treatment including the use of anaesthetics as considered necessary by the medical authorities.

**\*Further details or other relevant information:**

## Section 2

### Data Usage

#### 2.1 Photography/Video

Name and other personal information **will not** be used unless your specific permission is obtained first. Do you consent to photographs and/or videos of your child being used for:

- Internal use (eg. Sunday services)
- External use (eg. the All Saints' website)

#### 2.2 All parents/guardians

- I give permission for All Saints' Church to contact me regarding any activities pertaining to AllYouth using the email address provided in Section 1.
- I wish to receive general information about any other All Saints' Church activities.

#### 2.3 Parents/guardians of CYFA-age children only (14-18)

We communicate with our older teenagers using social media, ensuring that several youth leaders are involved and one-on-one communication between a young person and a leader never takes place. On this basis do you consent to us contacting your child using:

- Facebook page
- Facebook Messenger thread
- Instagram
- Twitter
- WhatsApp (also involves use of child's mobile phone number)

## Section 3

### General Agreement to join AllYouth and all associated age-relevant clubs and activities.

I agree to give permission for my child to participate in the normal weekly activities of their selected group(s). I understand that the leaders will take all reasonable care in looking after my child but they cannot necessarily be held responsible for any loss or damage to property.

I understand that if my child grossly misbehaves at any club or activity then AllYouth may bar them from further participation and require me to collect them at my expense. I agree to pay for deliberate damage to property caused by my child.

Transport to and from AllYouth clubs and activities is the responsibility of the member's parent or guardian. If in an exceptional circumstance it becomes necessary for AllYouth to transport my child every effort will be made to have more than one leader present and specific written permission (eg. by text message) will be sought.

I give permission for AllYouth to process the personal data given on this form for use in relation to my child attending AllYouth clubs and activities. Data will be kept in accordance with the General Data Protection Regulations and All Saints' Privacy & Safeguarding Policies.

**To be signed only by the parent or guardian named in Section 1.**

**Signature:**

**Date:**