

# All Hallows Catholic College Consent Form



Name of Student (block capitals) .....

Date of Birth .....

### SMS Text Messaging / Email

I give permission for the College to contact me via text/email in order to receive messages pertaining to my child about attendance, meetings, Parent's Evenings and letters, for example.

Yes  No

### Behaviour Policy

I confirm that we have read and discussed the Behaviour Policy available on the College website with our son / daughter.

Yes  No

### Permission for Paracetamol

I give permission for my child to be given 1 or 2 Paracetamol 500mg tablets (age and guidance dose appropriate) for relief of moderate pain. For further details please refer to the First Aid Policy.

Yes  No

### General Consent for Local Trips

During the academic year we take students off site, on local field visits within our catchment area, to represent the College, to study, or to attend Mass in the local Church. Students may walk or travel by coach, College minibus, bus or train and will be appropriately supervised.

I give permission for my child to go on local trips from the College during the time that they are a student at All Hallows Catholic College.

Yes  No

### Biometrics

I give consent for my child to sign up for the biometric College Printing and Cashless Catering.

Yes  No

### Photo and Video Consent

I consent to the College using photographs and videos of my child to celebrate achievements in the College

Yes  No

I consent to the College using photographs and videos of my child to celebrate achievements beyond the College and in the press.

Yes  No

Signed ..... (parent/carer)      Date .....

### Acceptable Use of ICT Policy for Students

I agree to abide by the All Hallows Catholic College ICT Acceptable Use Policy (to be completed by the student)

Student signature ..... Date .....