|  |  |  |
| --- | --- | --- |
| **CONSENTS – FURZE PLATT SENIOR SCHOOL** | | |
| The consents below will be effective for the whole of the time that the student attends Furze Platt Senior School unless you notify the school otherwise. You may withdraw your consent at any time by contacting the Data Manager at Furze Platt Senior School in writing at [**studentdetails@furzeplatt.net**](javascript:void(location.href='mailto:'+String.fromCharCode(115,116,117,100,101,110,116,100,101,116,97,105,108,115,64,102,117,114,122,101,112,108,97,116,116,46,110,101,116)+'?subject=Student%20Details%20Update&body=Student%20Name%3A%0AYear%20Group%3A'))**.**. Please specify which consent you wish to withdraw. If the withdrawal of consent relates to the sections entitled photographic, video, voice, biometric and internet consent, where practical any publications or material containing the image/voice of the student will be recalled and withdrawn.  Please indicate below whether you consent by **CIRCLING** Yes or No.  **NAME OF STUDENT:**  **YEAR GROUP:** | | |
| **MEDICAL EMERGENCY CONSENT** | | |
| In the unlikely event of a medical emergency, and a parent or carer being unavailable, I consent to the school acting and making decisions as appropriate. | Yes | No |
| **PE – EXTRA CURRICULAR SPORTS ACTIVITIES/MATCHES CONSENT** | | |
| I consent to my child taking part in after-school sports practices and team fixtures. I understand that some of these matches will involve travelling to other schools. | Yes | No |
| **INTERNET CONSENT** | | |
| I consent to my child receiving both general internet access and access to the school’s intranet for educational purposes. I understand that access to these facilities significantly enhances the quality of education the school provides. | Yes | No |
| **PHOTOGRAPHIC, VIDEO & VOICE CONSENT** | | |
| **Data Protection Act 2018 (also known as General Data Protection Regulation (GDPR))**  To comply with the Data Protection Act, Furze Platt Senior School needs your permission before we can photograph or make any recordings of your child. Please answer all the questions below.  The recorded image/voice/biometric data may be used only for the mentioned event(s) or activity(ies). | | |
| 1. I consent to the school using my child’s image to celebrate their success in publications including newsletters, brochures, publicity, information videos, and school displays. | Yes | No |
| 1. I consent to the school using my child’s image on the school’s website. | Yes | No |
| 1. I consent to my child’s image being used in outside publications including local newspapers, and to their name being provided to accompany such image. | Yes | No |
| 1. I consent to my child being featured on local TV and radio and to their name being provided to accompany any broadcast items. | Yes | No |
| **OFF SITE ACTIVITIES CONSENT** | | |
| Each year we run a number of educational trips and visits. Parents will receive a letter at the time of the trip seeking permission and asking them to confirm that their emergency contact numbers and their child’s medical details are up to date. | | |
| 1. I consent to my child participating in trips/outside activities organised by the school. | Yes | No |
| In addition, we ask all parents to read the statements below carefully and to indicate that they understand the conditions that are in place for all off site activities. | | |
| 1. I will ensure that my child understands that any rules and instructions given by staff must be obeyed. | Yes | No |
| 1. I undertake to inform the Leader of any changes in the health and fitness of my child prior to the date of departure. | Yes | No |
| 1. I accept full financial responsibility if my child has to return home before the end of the trip because of inappropriate behaviour. | Yes | No |
| 1. I am in agreement that those in charge may give permission for my child to receive medical treatment in an emergency. | Yes | No |