

St. Joseph's Convent Primary School.

Consent Note for School Trips etc.

I give my consent for my child _____ to participate in out of school trips, off site sporting activities and competitions including swimming lessons when applicable.

Signed : _____ **(Parent/Guardian)**

Consent Note for Emergency Treatment.

In the event of an emergency, I consent I do not consent to my child
_____ receiving treatment as considered necessary by the medical authorities.

Signed : _____ **(Parent/Guardian)**

Consent Note for Publishing School Photographs/Video Taping

I give permission for my child _____ to be photographed/ video recorded, individually, or in a school group. Photographs may be published in the local press, school publications or on the school website without individuals being identified.

Signed : _____ **(Parent/Guardian)**

Consent Note for Personal Care

In the event of a hygiene incident, I give permission for a member of staff to change my child's clothing and/or assist with intimate care.

Child's Name _____

Signed _____ **Parent/Guardian**

I give consent for my child's information to be sent to another school either at the end of Primary Seven or in the event of my child transferring at any time during his/her Primary Years

Child's Name _____

Signed: _____ **Parent/Guardian**

There are many children who suffer from a variety of allergies. In order to ensure that your child is as safe as possible if she/he suffers from any such allergies, it is vital that the school is kept informed. May I take this opportunity to remind you that **nuts or nut products** are **NOT** allowed to be eaten in school due to the danger they present where allergies are concerned.

My child (name) _____

Suffers from _____

Signed _____ **Parent/Guardian** Date: _____