

# Knock Presbyterian Church



## PARENTAL CONSENT FORM 2009- 2010

Anything written on this form will be held in confidence. The leaders need to know these details in order to meet the specific requirements of your child.

**PLEASE READ THIS FORM CAREFULLY AND COMPLETE ALL SECTIONS.  
COMPLETE ONLY ONE FORM PER CHILD AND PLEASE TICK ALL THE APPROPRIATE BOXES FOR ORGANISATIONS THAT YOUR CHILD ATTENDS.**

Organisations	Tick	Organisations	Tick	Organisations	Tick
Crèche		Junior Youth Club*		Squirrels*	
Beavers*		Lighthouse		<b>Summer Programmes</b>	
Brownies*		Madhouse		Junior Kingscross 3 <sup>rd</sup> to 7 <sup>th</sup> Aug 09*	
Cub Scouts*		Rainbow Guides *		Summer Sports Camp 10-14 <sup>th</sup> Aug09*	
Explorer Scouts		Scouts			
Guides*		Special Needs Youth Club			
Greenhouse		Souled Out			

- Organisations with \* have a limited number of places available. Completing the consent form DOES NOT guarantee your child a place; please contact the appropriate leader to request a place.

Child's First Name: \_\_\_\_\_

Child's Surname: \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Home Telephone No: \_\_\_\_\_

Address: \_\_\_\_\_  
Street
Town
Post Code

Email: \_\_\_\_\_ School year 2009/10: \_\_\_\_\_ D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: M F

Emergency Contact 1: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Phone: \_\_\_\_\_  
Daytime
Mobile

Emergency Contact 2: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Phone: \_\_\_\_\_  
Daytime
Mobile

Church attended, if any: \_\_\_\_\_ School/College attended, if any: \_\_\_\_\_

Child's Mobile Number \_\_\_\_\_ Child's Email: \_\_\_\_\_

Name and phone number of GP: \_\_\_\_\_

Details of any known medical conditions, allergies, etc (e.g., asthma, diabetes, epilepsy) and any medication being taken: \_\_\_\_\_

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Please indicate what symptoms will be displayed relevant to any allergies or condition and how best to respond to these symptoms: \_\_\_\_\_

Any other special needs, requirements or directions that would be helpful for the leaders to know about: \_\_\_\_\_

**PHOTOS/VIDEO CLIPS:** During the year photographs/video of your child may be taken at activities connected with the above organisations. These may be used for general purposes within the Church, in the media, on the Church and organisation web-sites, posters, brochures and other printed material. **Unless indicated otherwise, I give permission for my child to be photographed and videoed for the above purposes. If any restrictions apply, please state these here:** \_\_\_\_\_

I give permission for my child to attend all of the organisations ticked above and to participate in all their activities.

I will inform the leaders of any important changes to my child's health, medication or needs.

In the event of illness or accident, having parental responsibility for the above named child, I give permission for first aid to be administered when considered necessary by a trained first aider, if available, and/or medical treatment to be administered by a suitably qualified medical practitioner.

If I cannot be contacted and my child should require emergency hospital treatment, I authorise an adult leader to sign on my behalf any written form of consent required by the hospital. However, I understand that every effort will be made to contact me as soon as possible.

I confirm that to the best of my knowledge the above details are correct.

Parent/Guardian's name printed in full: \_\_\_\_\_ Signature: \_\_\_\_\_ (Parent/Guardian) Date: \_\_\_\_\_

**I will notify the Church Office immediately of any changes to the information provided on this form.**

#### **Data Protection**

The Data Protection Act 1998 establishes rights for individuals in relation to what information is held about them and how it may be used.

Knock Presbyterian Church is committed to a policy of protecting the rights and privacy of individuals in accordance with the Data Protection Act. The church needs to process certain information about its members and other individuals it has dealings with for administrative purposes. To comply with the law, information about individuals must be collected and used fairly, stored safely and securely and not disclosed to any third party unlawfully.

All staff and leaders are responsible for ensuring that any personal data (on others) which they hold are kept securely and that they are not disclosed to any unauthorised third party

All personal data should be accessible only to those who need to use it. Your personal data is stored by:

- Original consent forms retained in a lockable room with controlled access,
- Inputted into a computerised data system and password protected.

Consent forms will be retain for a period of 6 years as instructed by Presbyterian Church of Ireland and then destroyed.

We may pass statistical information to our governing body the Presbyterian Church in Ireland. The nature of statistical information will include age profile of the congregation and the number of families within the church.

Members of our uniformed organisations will need to be submit information to their headquarter organisation to maintain their records.

We may also need to disclose your information if required to do so by law.

Members of the youth organisations have the right to access any personal data which are held by the Church in electronic format and manual records which form part of a relevant filing system. This includes the right to inspect confidential personal references received by the Church about that person.

Any individual who wishes to exercise this right should apply in writing to the Administrator. The Church reserves the right to charge a fee for data subject access requests (currently £10). Any such request will normally be complied with within 40 days of receipt of the written request and, where appropriate, the fee.