



Harrietsham Church of England Primary School

Consent Form



Child's Name: _____ Date of Birth: _____

PHOTOGRAPHS

I agree to my child being photographed for use in their learning, on school displays and on promotional materials used within school only. These will not be shared with those outside of school.

Signed

PHOTOGRAPHS WITHIN SCHOOL

I agree that my child's photograph can be securely added to platforms such as Dojo and Tapestry. Photographs would be password protected and not viewed by others.

Signed

PHOTOGRAPHS SHARED ON DOJO & TAPESTRY

I agree that my child's photograph can be shared on platforms such as Dojo and Tapestry and seen on other children's accounts.

Signed

LOCAL NEWSPAPER PHOTOGRAPHS

I agree to my child being photographed for the local newspapers with the full name withheld. This will include publication of associated articles online.

Signed

PHOTOGRAPHS BY THIRD PARTY

I agree to my child being photographed, both individually and as a class by the school photographer for the purpose of providing photos for me to purchase.

Signed

SCHOOL WEBSITE

I give permission for my child to appear on the school website and associated online content with the name withheld.

Signed

TAKING VIDEOS

I agree that my child can be included in any video taken of school events with the full name withheld. This will include filming by fellow parents at school productions. It will be made very clear that this cannot be published via any media and is for personal viewing only.

Signed

VILLAGE VISIT

I give permission for my child to walk around Harrietsham village as part of the school curriculum.

Signed _____

CHURCH VISITS

I give permission for my child to attend church for the end of term services and any other visits that relate to their learning.

Signed _____

FOOD TASTING

I give permission for my child to participate in food tasting as part of the teaching.

Food Allergies: _____

PLASTERS

I give permission for a plaster to be applied, should the need arise for my child to have one.

Signed _____

DRIVING

I give permission for my child to travel in a (suitably insured) staff member's car in the case of an emergency.

Signed _____

VIEWING OF PG FILMS

I give permission for my child to watch a PG film under the supervision of an adult.

Signed _____

My child will be collected from school at the end of the day by _____

The following people can also collect my children without further consent:

Please note: This form is valid for the period of time your child is on roll at Harrietsham Primary School. If you wish to make any changes, please email the school office at office@harrietsham.kent.sch.uk or call the school on 01622 859261 and we will provide a new form for completion. Please do not hesitate to contact the school office if you have any queries.

Date: _____

Child's Name: _____

Signature: _____