

PARENTAL CONSENT FORM (FOR UNDER 18s)

GHYLL HEAD

Outdoor Education
& Activity Centre

Students Name:		Date of birth:
School/Organisation:		
Your child's medical record states: <input type="checkbox"/> Female <input type="checkbox"/> Male		Your child's gender identity is different to their sex assigned at birth: <input type="checkbox"/> Yes <input type="checkbox"/> No
1. Visit to Ghyll Head Outdoor Education Centre		
Course dates from:		to
I agree to my son/daughter (print):		
Taking part in the above-mentioned visit and, having read the information sheet, agree to his/her participation in any or all of the activities described. I acknowledge the need for obedience and responsible behaviour on his/her part.		
2. Medical Information (Please use additional pages if necessary)		
Does your son/daughter suffer from any conditions requiring medical treatment, including regular medication? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please give details		
.....		
If you feel that there is a sensitive issue which you prefer not to write on the form, please discuss it with the party leader		
To the best of your knowledge, has your son/daughter been in contact with or suffered from any contagious or infectious diseases in the last 4 weeks? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please give details		
.....		
Is your son/daughter allergic to any medications? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please give details		
.....		
Has your son/daughter received a tetanus injection in the last 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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3. Other Information

Please outline any special dietary requirements of your child

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If necessary, in the case of pain/flu relief, may your child be given paracetamol?

Yes No

Does your child have any other condition or additional need that the Centre staff need to be aware of e.g. dyslexia?

.....

4. Declaration (Please read and tick)

- I undertake to inform the organiser/Head, as soon as possible of any change in the medical circumstances between the date signed and the commencement of the visit.
I agree to my son/daughter receiving any emergency dental/medical treatment or surgery, including anaesthetic or transfusions, as considered necessary by the medical authorities present. I understand the extent and limitations of the insurance cover provided.

I may be contacted by telephoning the following numbers:

Home:

Mobile:

Work:

My home address is:

.....

.....

I may be contacted by telephoning the following numbers:

Name

Telephone No.

Address:

.....

.....

Name, address and telephone number of family doctor:

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5. ICT / Use of Images Consent

During the visit to Ghyll Head, pupils may have an opportunity to use the internet. Internet access will be filtered and supervised. Rules for usage of computers will be as in school.

Digital cameras may be used to record activities at the Centre. Files at Ghyll Head are secure and periodically deleted. Any images of children, or copies of their creative work retained may be used for publicity on Ghyll Heads website or publicity material. Images will be of a positive nature and the anonymity and dignity of your child will be respected and preserved.

Parental consent to the use of electronic mail and the internet (Including social media eg: Facebook & Twitter):

Yes No

Parental consent for use of photographic images or creative work:

Yes No

Signed:

Date:

Full Name (print):

6. GDPR STATEMENT

Ghyll Head collects the information on this form to ensure the safety and wellbeing of course participants.

We will not share the information with anyone - except medical professionals in the event of a need for treatment, or in the event of a reportable accident with the Health & Safety Executive.

The information will be securely stored at the centre during the course and afterwards all documents are destroyed. In the event of an accident or incident information provided on the medical consent form along with any incident reports will be kept for the time required by the Limitation Act 1980. (I.e. 7 years for adults, until a young person reaches the age of 25.) Paper copy is kept on site in secure storage; any digital copy is kept on our server with restricted access.

If you wish to access the personal information that we hold you should contact the Head of Ghyll Head Outdoor Centre on 015394 43751 or email ghyllhead@gll.org

The General Data Protection Regulation (GDPR) comes into force in May 2018. Ghyll Head is managed by Greenwich Leisure Ltd. Below is our statement of compliance which covers all Greenwich Leisure Ltd. services for your records.

As a data controller for your organisation we will ensure that:

- Data is processed in a fair, transparent and lawful manner
- Data is only processed for the reasons for which we have been contracted as a supplier
- Data will always be held in accordance with the General Data Protection Regulation
- Data is transmitted safely and securely to comply with GDPR
- Data is not shared with third parties unless we have a lawful reason for doing so
- Data held about individuals is not kept for longer than necessary for the purposes required
- Personal data will be disposed of in line with GDPR principles and Greenwich Leisure Ltd's retention guidelines after it has served its purpose
- We will make information available to your organisation to demonstrate our compliance with the GDPR obligations in our contract, and allow you or a third party instructed by you to conduct audits and inspections in relation to GDPR

Greenwich Leisure Ltd' confirms that we will comply with the above.

Greenwich Leisure Ltd privacy policy: www.better.org.uk/privacy

In partnership with

GLL



**MANCHESTER
CITY COUNCIL**