

**General parental permissions**

***Emergency treatment declaration***

In the event of an accident or emergency involving my child I understand that every effort will be made to contact me immediately. Emergency services will be called as necessary and I understand my child may be taken to hospital accompanied by the manager (or authorised deputy) for emergency treatment and that health professionals are responsible for any decisions on medical treatment in my absence.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signed |  | | Date |  |
| Printed name | |  | | |

***Vaseline***

I give permission for Vaseline to be administered to my child if required (eg in the case of nappy rash if I have not supplied cream, or if they develop sore or chapped skin and do not have their own cream), in accordance with the manufacturer’s instructions.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signed |  | | Date |  |
| Printed name | |  | | |

***Suncream***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I give permission for staff to administer suncream (supplied by me) to be applied to my child when necessary | | | | |
| Signed |  | | Date |  |
| Printed name | |  | | |

***Short trip - general outings***

Your child may be taken out of our setting (for walks around the local area or over to St Thomas’ Church) as part of the daily activities.

|  |  |  |
| --- | --- | --- |
| I give permission for |  | (name of child) to take part in short trips or |

general outings. I understand that individual risk assessments are carried out for each type of trip or outing taken and are available for me to see as required. For any planned outings, I understand I will be informed and my specific consent obtained.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signed |  | | Date |  |
| Printed name | |  | | |

***Photographs***

As part of the on-going recording of our curriculum and for children’s individual development records, staff regularly take photographs of the children during their play. These photographs are used for display and for your child’s records within the setting.

I give permission for my child named above to be photographed and the photos used in:

St. Thomas’ Pre-school

St. Thomas’ Church

On St. Thomas’ Pre-school website

On St. Thomas’ Pre-school facebook page

On Promotional/publicity information

Occasionally in newspaper articles

(Please delete any of the above you do not feel happy with)

I am happy for my child’s photograph to be used in all or only as indicated above:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signed |  | | Date |  |
| Printed name | |  | | |

***Sharing Information***

Your child’s key person may share information about your child with other professionals to assist in your child’s learning and development. These may include health visitors, staff from other settings (if your child attends more than one setting), and your child’s school when they start school.

Please sign below to indicate consent for information to be shared with other relevant professionals:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signed |  | | Date |  |
| Printed name | |  | | |

**A note on safeguarding**

As registered providers of early years’ childcare, the staff at St Thomas’ Pre-School are required by law to safeguard the health and welfare of the children who attend in line with our policies and procedures. In the event of a concern over a child’s health or welfare the staff are obliged to report their concerns to the relevant bodies and to act in the child’s best interests at all times. We are obliged to share confidential information without authorisation from the person who provided it or to whom it relates if it is in the public interest.