



St. Andrew's
C.E. Primary School

September 2018

Consent Requests

Please delete as appropriate

I consent to RISE & SHINE or STAR CLUB (Breakfast or After School Club) staff administering plasters to my child if required.

I understand that I need to complete a separate medical form if I wish RISE & SHINE/STAR CLUB staff to administer medicines.

I consent to RISE & SHINE/STAR CLUB seeking emergency medical attention should it be required.

I consent to photographs of my child being used for publicity or educational purposes by RISE & SHINE/STAR CLUB.

I consent to photographs of my child being taken and used in displays within the RISE & SHINE/STAR CLUB/School setting.

Child's Name:

Signature of Parent/Guardian:

Name of Parent/ Guardian (please print):.....

Date:.....