

# Learn Nepali Programme (LNP)

## Parental Consent Form 1

**SECTION A – PERSONAL DETAILS** (To be completed by adult with legal parental responsibility for the named child)

Childs Name: ..... Date of Birth.....

Name of persons with legal parental responsibility for this child: .....

Parents email address: .....

Address ..... Postcode: .....

Tel No: ..... Mobile No: .....

### SECTION B - CONSENT FOR PHOTOGRAPHS

During the time your child spends at LNP, photographs may be taken for general LNP purposes to include internal and external publications and Charlton Samaj website or LNP facebook page. Do you consent to your child's image being taken and used as indicated?

Signed: ..... Date: .....

Print Name: .....

### SECTION C – CONSENT FOR FIRST AID

In the event of illness or accident, I give my permission for first aid to be administered where considered necessary by a trained first aider. In the case of an emergency, teachers/appointed personnel will do everything possible to contact the parents so that they can make the appropriate medical decisions for their child. In extreme circumstance where medical treatment is required without delay and I am unavailable, I authorise the first aider to give consent for medical treatment on my behalf.

Signed: ..... Date: .....

Print Name: .....

### SECTION D - MEDICAL DETAILS

Details of any known medical conditions, allergies etc. (eg asthma, diabetes, epilepsy) and also any medication being taken (if medication is to be taken during LNP sessions please speak to the Coordinator.) Please give as much information as possible: .....

Any other relevant special needs, requirements or information that would be helpful for LNP team to know? (eg dyslexia, ADHD or family circumstances if relevant.) .....