

CODE OF BEHAVIOUR

Although we expect that your child will contribute fully and enjoy the programme, we do however reserve the right to remove any child who's behaviour may cause danger to him/herself or others. We expect that all the children will fully respect the facilities. If in the unlikely event that a child fails to adhere to these principles, we will notify you immediately in order that you may collect your son/daughter – who will as a result, not be allowed to participate further in the programme.

Please sign to acknowledge your agreement with the above.

Signed _____ Date _____

THE GAIETY SCHOOL OF ACTING CHILD PROTECTION GUIDELINES

I have been made aware that the Gaiety School of Acting has developed child protection guidelines and they are committed to ensuring the safety of my child by having:

- A code of behaviour for staff and workers
- Clear recruitment policy of all tutors
- An anti-bullying policy
- Disciplinary Procedures
- A designated person for child safety and protection
- Guidelines on confidentiality
- A photography policy

Signed _____ Date _____

From time to time we may send you information on things that might interest you. Please tick this box if you do not want to receive any information from us in the future.

Please tick this box if you do not want to receive any text messages from us in the future.

I confirm that all details are correct and to the best of my knowledge and I am able to give parental consent for my child to participate in the Gaiety School of Acting activities.

Child/Young Persons Signature _____

Print Name _____

Parent/Guardian Signature _____

Print Name _____

Relationship to child _____

(Consent must be provided by the person with parental responsibility)

Date _____

Parental Consent Forms

Gaiety School of Acting



PERSONAL DETAILS

Name (child): _____

Date of Birth: _____

Address: _____

Telephone: _____

I agree to my son/daughter _____ (name) taking part in _____ (please give name of the GSA course).

I acknowledge the need for obedience and responsible behaviour on his/her part.

EMERGENCY CONTACTS (Should be in a position to collect the child if necessary)

Contact 1 Parent/Guardian

Name: _____

Address: _____

Relationship to child: _____

Telephone number in work: _____

Telephone number home: _____

Telephone number other: _____

Contact 2 Parent/Guardian

(Should be different contact details from Contact 1)

Name: _____

Address: _____

Relationship to child: _____

Telephone number in work: _____

Telephone number home: _____

MEDICAL DETAILS

Does she/he suffer from any allergies? Yes No

If yes please list and detail any related medicines or inhalers used

Does she/he suffer from any medical conditions e.g. diabetes, epilepsy, heart trouble?

Yes No

If yes, please give details

MEDICAL DETAILS CONTINUED....

Does she/he have:

Impaired hearing Yes No

Impaired vision Yes No

Other disability Yes No

Please detail:

Current Medication

Is she/he taking any medication/treatment?

Yes No

Please detail:

Does she/he need to be in possession of or need to be able to administer medication during programme activities?

Yes No

If the child is unable to administer the medication themselves:

I give permission for the person in charge/first aider to give my child the following medication _____ (medication, dosage and frequency). I enclose a letter from the GP stating that the person in charge/first aider can administer the medication.

In the unlikely event of an emergency it is important to know if she/he can take:

Paracetamol Yes No

Panadol Yes No

Aspirin Yes No

When did she/he last have a tetanus injection?

Has she/he had any adverse reaction to an anesthetic? Yes No
If yes please give details:

In the case of an emergency, tutors will do everything possible to contact the parents/guardians so that they can make the appropriate medical decisions for their child. In extreme circumstances where medical treatment is required without delay and it has been impossible to contact those named on the consent form, I authorise the certified first aider and/or person in charge to give consent for any medical treatment on my/our behalf.

Yes No

GETTING HOME

Can your child walk home alone? Yes No

My son/daughter can be collected by:

Name of Individual _____

OR _____

No child will be allowed to leave alone unless we have received parental consent.

Signed _____ Date _____

PHOTOGRAPHY POLICY

Dear Parent

We will be taking photographs of staff and students at various times throughout the year to update our library of images and members of the print media will on occasion take photographs of our students for publicity purposes.

We would like your permission to use any images taken of your child in various publications and promotional material. Examples of where we might want to use these photographs include authorised internet pages, informational leaflets, guidance booklets, corporate publications (such as annual reports), CD ROM/electronic based documents, authorised videos/DVD and press releases.

Permission relates to official or endorsed promotional materials only.

We need to know whether you are happy for us to use your child's image for these purposes and in these formats. Therefore, it would help us greatly if you would tick any (as many as you wish) of the following where you consent to the use of images of your child:

Paper based documents/ publications

Internet media

CD ROM/ Electronic Documents

Video/ DVD

Policy Documents

News Media (e.g. Newspaper Items)

The pictures will be used for a maximum of 12 months after which we will contact you to check that we have the correct details and to establish whether you still consent to our use of your child's image. However, should you choose to withdraw your consent before this time then please contact us and we will respect your wishes as quickly as possible.

DECLARATION

I grant permission for images of my child to be used in the formats indicated above.

Signed _____ Date _____

Should you wish to view the photographs/images of your child, copies will be made available at the school for you to see on request.