



Unique people,
individualized approach

Peak School Consent Form 2017 - 2018

Pupil's Name: _____

Please tick as appropriate:-

Hydrotherapy pool **I give my permission** **Yes** **No**

VIDEO CONSENT

For use in school **I give my permission** **Yes** **No**

To distribute to pupils of Peak School and their families
I give my permission **Yes** **No**

For use outside school e.g. talks, training etc
I give my permission **Yes** **No**

For use on the school website
I give my permission **Yes** **No**

For use on the school Facebook page
I give my permission **Yes** **No**

PHOTOGRAPH CONSENT

Official school photograph **I give my permission** **Yes** **No**

For use in school **I give my permission** **Yes** **No**



To distribute to pupils of Peak School and their families	I give my permission	Yes	No
For external use e.g. talks, training etc	I give my permission	Yes	No
For use on the school website	I give my permission	Yes	No
For inclusion in the newsletter	I give my permission	Yes	No
For use on the school Facebook page (showing face)	I give my permission	Yes	No
For use on the school Facebook page (NOT showing face)	I give my permission	Yes	No

In various classes the following activities may take place, for convenience we would be grateful if you could give your consent to them taking place.

PERSONAL SOCIAL & HEALTH EDUCATION

Teeth cleaning	I give my permission	Yes	No
Hair washing	I give my permission	Yes	No
Nail care	I give my permission	Yes	No
Aromatherapy (this may include either hand cream, moisturising cream or essential oils)	I give my permission	Yes	No

Signed _____

Name _____

Date _____

