



Child's Name: _____ Class: _____ Date: _____

Photographs of Children

During your child's school life, we like to take photographs and brief films of the children taking part in various activities. We use these for evidence of their achievements. Any photographs / video clips taken will only be used in school and will never be displayed publicly. We never display children's full names with their photographs.

I agree to photographs / short video clips of my child being taken and for photographs to be displayed around school.

Signed: _____ Parent / Carer

Charging for School Activities

Our aim is to deliver a broad and rich curriculum in which we may plan activities that incur an additional cost to school, for example, school visits, cooking, craft activities and visitors to school. Due to Government legislation, schools are unable to charge for these experiences, but may instead ask for a voluntary contribution towards the cost of the visit. The children can only access these enriching opportunities with the support of parents and carers to cover the costs.

I agree to support the school in the above aim and endeavour to make a voluntary contribution when requested.

Signed: _____ Parent / Carer

Visits to Christ Church and Christ Church Parish Centre

We have close links with the church and local community and therefore some school activities will take place at Christ Church and the Parish Centre. You will be informed of any visits being made and we ask that you give your permission for your child to attend these.

I give permission for my child to visit Christ Church and Christ Church Parish Centre as part of their school life.

Signed: _____ Parent / Carer

Additional Needs

We need to know if your child wears glasses or has any other additional needs, for example with hearing, speech, motor control, or a medical diagnosis. Please give us any details we may require below:

Allergies

Your child may be participating in activities where they may be required to taste different foods and drinks. Please inform us of any allergies / medical reasons that may prevent them from participating in these activities.

I give permission for my child to take part in food and drink tasting activities. Allergies / medical reasons that you should be aware of when doing this are:

Signed: _____ Parent / Carer