Parent/Carer Consent Form for Children/Young People

Guidance for the organisation/individual asking for the information:-

This form should be used to gather any information about a young person's medical history or additional needs that is pertinent to the activities they will be undertaking on a regular basis with you/your organisation.

This information is classified as 'Special Category' under the UK Data Protection Act 2018 and this means that you need to take additional care when collecting, storing, using and disposing of it.

- Only ask for the details that you actually *need*, and never ask for information that you're not already *sure* that you need to know.

- Keep this information safe and secure. It should be kept separately from other personal records and only be accessible by those individuals who need to access it and who have received appropriate training on handling personal data.

- Keep this information updated regularly. Depending on your organisation or activities, or on the needs of the individuals you are working with, this might mean you need to ask parents/guardians whether the information you hold is correct every time you meet, or just once year. It is for your organisation to assess and decide what is appropriate. You should make a note of this decision, so that there is a record of you considering it. It is usually sufficient to simply ask whether there are any changes to be made to the information, but if you do this, you should make a note of when you asked for updates and amendments.

- You should dispose of this information as soon as it no longer has a purpose for your organisation. It is for your organisation to decide what this time period is and make a note of it. If the individual is a client, you may decide that you can dispose of the information as soon as you know they are no longer using your service. There may be requirements for you to keep the information for longer however. For example, if your client had an accident while under your instruction/observation and your insurance company requires you to keep all records about that client until three years after their 18th birthday. You should check to see whether you have *obligations* to keep the information and then set a disposal date accordingly.

- When you dispose of the information, do so securely. Shred paper forms or use a professional data disposal service.

- Tell the individuals using your service (or their parents/guardians) about how you use, store and dispose of the information. Make sure they know who to contact in case they want to update the information or make a request to see the personal data you hold (this is called a Subject Access Request and there are strict rules about how you manage these). You should create a Privacy Notice and make sure anyone that uses your service can access it – so display it on a noticeboard in your Reception area, put it on your website or give parents/guardians a copy of it when they first engage with you.

Children over the age of 16 are able to give their own consent to data processing. Children over the age of 13 are able to give their own consent if you are offering an online service.

Details on this form will be held securely and will only be shared with coaches or others who need this information to meet the specific needs of your child. We will endeavour to ask for updated details on a regular basis. For specific events we may ask for further consent. The information will be retained until your child no longer takes part in activities.

More advice is available www.bhs.org.uk/safeguarding

Details of Child/Young Person	
Name: Preferred Name if different:	
Address:	
Date of Birth:	
Gender:	Male / Female / Non-binary / Another description (please state)
Telephone number: (Inc. Mobile)	
Email Address:	

Parent Carer Details	
Name of Parent/Carer:	
Telephone Number:	
Address of Parent/Carer:	
Are there any activities your child can not participate in?	
Emergency Contact Information	
Name of alternative adult to contact in emergency:	
Relationship to child or young person:	
Contact number(s) of alternative adult:	

Medical Information	
Details of any medical conditions, allergies or dietary requirements we should be aware of (including medications needed whilst participating)?	
Additional Needs	
Please provide details of any particular additional needs we should we aware or support we can offer for you to take part:	
Consent information	
☐ Yes I have received comprehensive details of the activity and consent to my child taking part in the activities indicated.	
☐ Yes I give my consent that if an emergency medical situation arises, the organisation may act as loco parentis. If the need arises for administration of first aid and/or other medical treatment which in the opinion of a qualified medical practitioner may be necessary.	
☐ Yes I can confirm that I have read, or been made aware of the organisations/clubs policies on:- • Code of conduct for coaches, parents, children and young people • Videoing and photography • Safeguarding Policy	
Signature of child/young person:	
Signature of Parent/Carer:	
Date:	