



Summer Language School 2020

PARENTAL CONSENT FORM

including Trips & Other On- and Off-Site Activities

This form goes to parents & host families. It asks for information & parental consents.

PART 1 - to be completed by a parent or guardian of the student (CAPITALS PLEASE)

The numbers in brackets () refer to the document 'Notes to help you filling in the forms' please read these!

Name of Child:	Doctor/ GP Surgery incl. Address & Phone:
Date of Birth:	
Nationality:	
Main Language:	
Religion:	
Passport No (req for some school trips):	Passport Expiry Date:

Medical Consents & Information	Please circle your answer - like this: Yes / No <u>(n/a)</u>
<p>Please note: In the interest of your child's safety and your piece of mind, if your child has a serious and/or acute condition which may require emergency intervention by SLS staff including but not limited to inhalers and epipens, YOU MUST provide the school with a risk assessment/ medical care plan written by your doctor. Without this we will not be able to provide a safe environment if you do not do so and must ask you to not send your child.</p>	
Does your child have any conditions requiring medical treatment?	YES / NO
<i>If YES, please give brief details, including information on any medication being taken:</i>	
If Yes, is this condition ongoing?	YES / NO / n/a
<i>If not, please state when you expect them to recover; if there are no conditions that require medical treatment, please circle n/a:</i>	
If Yes, does your child require medication during school hours?	YES / NO / n/a
<i>If yes, please give details; if there are no conditions that require medical treatment, please circle n/a:</i>	
If YES, do you require the SLS to administer the medicine?	YES / NO / n/a
<i>If YES, please state here or attach details of what you are asking the SLSI to do; if there are no conditions that require medical treatment, please circle n/a:</i>	
If Yes, do you require the the host family to administer the medicine?	YES / NO / n/a
<i>If YES, please state here or attach details of what you are asking the host family to do; if there are no conditions that require medical treatment, please circle n/a:</i>	
Does your child suffer from allergies?	YES / NO

<i>If yes, please give details:</i>	
Is your child allergic to any medication?	YES / NO
<i>If yes, please give details:</i>	
Does your child require an Epi Pen?	YES / NO
<i>If yes, please give details:</i>	
Does your child require an inhaler?	YES / NO
<i>If yes, please give details:</i>	
I agree to my child receiving emergency dental or medical treatment, including medication, anaesthetic or blood transfusion, as considered necessary by the medical authorities (6): (Please note that responding 'NO' to this question might mean that your child cannot go on some trips.)	YES / NO
Did your child have any recent vaccinations?	YES / NO
<i>If yes, please state which and when:</i> Tetanus Date: Measles Date:	
I give my consent for my child to receive vaccinations as considered necessary by the medical authorities?	YES / NO
I consent to my child receiving first aid or urgent medical treatment during the SLS at school, on trips or during on-/off-site activities: (Please note that responding 'NO' to this question might mean that your child cannot participate in the SLS or go on some trips or take part in some activities.)	YES / NO

Dietary Requirements	Please <u>circle</u> your answer - like this: <input checked="" type="radio"/> Yes / No
Does your child have any special dietary requirements:	YES / NO
<i>If yes, please give details:</i>	

Media Consent (8) Before completing this section, please read the document 'Notes to help you filling in the forms' (setion 8). If you have any questions, please contact us.	Please <u>circle</u> your answer - like this: <input checked="" type="radio"/> Yes / No
In publications and publicity produced by the SLS (e.g. prospectus, leaflets, notice board, posters, SLS Magazine, SDSS Friday Flier):	YES / NO
On websites, electronic prospectus etc.	YES / NO
For externally produced publications (e.g. local or national newspapers, magazines) – this may mean their photo and name is used in print:	YES / NO
To be recorded on video/ film and used for advertising purposes:	YES / NO
Photographs/ film on SLS social media sites (e.g. Facebook, Instagram):	YES / NO

SLS Activites, Off-Site & Trip Consents	Please <u>circle</u> your answer - like this: <input checked="" type="radio"/> Yes / No
I consent to SLS staff applying sun lotion to exposed areas of skin limited to the face, ears, neck, arms and lower legs:	YES / NO
I have read the SLS guidelines and the course programme, and I agree to the	YES / NO

conditions and consent to my child attending the course, taking part in all SLS on-site and off-site activities and trips and live with a host family as agreed:	
I believe my child is a competent swimmer:	YES / NO
I give my consent for my child to swim under the conditions of the SLS Open Water Policy:	YES / NO

Other Agreements	Please circle your answer:
I have hereby been made aware of the SLS and SDSS website and their policies:	YES / NO
I am aware of the SLS guidelines for the use of private vehicles available on the website (under Policies) (7):	YES / NO
I give my consent that my child is allowed to travel in cars of other Summer Language School host families (lift sharing), whose cars are inspected under the same guidelines as their own host families car (safety, insurance, driving licence):	YES / NO
I give my consent that my child is allowed to sleep over at another Summer Language School host family's home if he/she wishes to do so. All hosts and host families are recruited under the same guidelines (DBS check/police check in place and Accommodation Risk Assessment carried out):	YES / NO

Parent Contact Information (If there is only one parent, fill in as applicable)			
	Mother	Father	Alternative Contact
Relationship:	n/a	n/a	
Name:			
Email:			
Home Tel:			
Work Tel:			
Mobile Tel:			
English spoken?	YES / NO	YES / NO	YES / NO
Home Address:			

Alternative Emergency Contact Information (someone to contact if we cannot reach you)	
Relationship:	
Name:	
Email:	
Home Tel:	
Mobile Tel:	
English spoken?	YES / NO

Additional Information
<i>Tell us anything you feel is important for the welfare of your child:</i>

PLEASE sign the Parental Consent Form at the bottom of this page (page 4 of 4).

PART 2 - to be completed by a host family adult (CAPITALS PLEASE)

Host Family Contact Information			
(If there is only one host, fill in as applicable)			
	Mother	Father	Alternative Contact
Name:			
Email:			
Home Tel:			
Work Tel:			
Mobile Tel:			
Home Address:			

Alternative Emergency Contact Information	
(someone to contact if we cannot reach you)	
Relationship:	
Name:	
Email:	
Home Tel:	
Mobile Tel:	

Please note the following important information before signing this form:

- The trips and activities covered by this consent include;
 - all visits (including residential trips) which take place during free afternoons, evenings and on weekends
 - all SLS on-site and off-site activities and trips stated on the SLS website
 - off-site sporting fixtures outside the school day
- Information on trips and activities can be found on the SLS website. You can contact us for additional information. Host Families receive further details on trips and off-site activities (pick up/drop off times etc.)
- You can, if you wish, tell us that you do not want your child to take part in particular SLS trips or activities.
- The SLS advises parents to keep a copy of this form for future reference.

Signed:	Date:
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Live & Learn Language Ltd. at South Devon Steiner School

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