



Executive Head Teacher: Mr Paul Harris
Acting Head of School: Ms Alison Helm

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PHOTOGRAPH / VIDEO CONSENT

Dear Parent / Carers,

Photographs and videos of the children are taken on a regular basis in school and on school visits. These are for educational purposes and help us to assess your child's development. Sometimes the materials are used for other students and teachers. Occasionally we might be asked for photographs to go in the newspaper to celebrate school life and pupils' achievements and on occasion we are asked by certain television channels to take part in programmes. We only agree to take part in these types of activities if we are happy with all the arrangements involved and /or feel it would be beneficial and enjoyable for the children.

Please sign the form below to give your consent for your child to take part in any of these events should they arise and return to the school office.

Yours sincerely
Paul Harris
Head Teacher

PHOTOGRAPH / VIDEO CONSENT

I give my consent for staff/approved organisations to take photographs and videos of my child strictly for educational and publicity purposes.

Name of Child : _____

Parents Name : _____

Parents Signature : _____

Date : _____



SCHOOL VISITS PARENTAL CONSENT FORM

It is expected that various trips will be organised during the school day to support the teaching of the National Curriculum. In order for your child to be included you are asked to complete and return the general purpose consent form below. All trips will be subject to the general conditions set out below, unless specifically notified otherwise in writing.

- I agree to my child _____ taking part in local visits and day trips which may occur from time to time.
- I understand that the school and the organisers will take all reasonable and proper precautions for the care and safety of my child and of his/ her personal property. I also understand that the council and the organisers will only be responsible for any injury or loss of personal property if this is caused by the Council's negligence.
- I agree to inform the school of any relevant medical or other special circumstances affecting my child, including any treatment required during the course of a visit.
- I understand that if my child should need emergency medical treatment, every effort will be made to contact me before treatment is given. If however, this is impossible, I give my consent to my child undergoing emergency medical treatment.

INTERNET PERMISSION

PUPIL

I wish to use the school computers and use the internet for my work. I agree to follow school rules about using computers and to behave in a sensible and responsible way.

PARENT

I give permission for my child to use email and the internet as part of his / her work in school. I will also encourage my child to act responsibly when using the internet at school and at home.

Child's Name: _____

Signed : _____ (parent / carer)

