

## **Parent/Carer Permission Form**

Child's Name			Class	
Pupil Participation in Med	dia Events			
I give permission for my ch	ild to take part in	activities involvin	g:	
Photographs	Videos	Television		
Yes	Yes		Yes	
No	No		No	
Newspapers	Radio		Internet	
Yes	Yes		Yes	
No	No		No	
I give permission for my ch	ild to be filmed b	y Academy staff o	during performances	
Yes	No			
I give permission for my ch performances	ild to be filmed b	y members of the	audience during	
Yes	No			
ICT Code of Practice				
I give permission for my ch ICT with my child	ild to use the inte	ernet at our Acade	emy and have discussed the safe use	of
Yes	No			
Visits to Local Community	ty:			
I give permission for my ch	ild to take part in	visits in the comr	munity	
Yes	No			
Reading and Library Boo	ks:			
I agree to contribute £5 tov	vards the cost of	a replacement bo	ook, if my child's book is	
lost or damaged				
Yes	No			
Sun Care:				
I give permission for sunsc	reen (provided b	y the Academy) to	be applied to my child	
I will supply my own sunsc	reen 📖			
Signed		Parent /Carer	Date	