



Annual Parental Consent Form

About our GB Company (this section is to be completed by the Company)

Company: 219 th Donacloney Presbyterian	
Captain/leader-in-charge of Section: Lesley McClelland/Christine Simmons	
Section: 3-5s <input checked="" type="checkbox"/> Explorers <input type="checkbox"/> Juniors <input type="checkbox"/> Seniors <input type="checkbox"/> Brigaders <input type="checkbox"/>	Day Section meets: Wednesday
Section times: Start time: 6.30pm Finish time: 7.30pm	(NB supervision provided during these times only)
Using IT to contact young people: In this company we use the following methods to contact Seniors/Brigaders. We seek your permission for this on page 2. Text <input type="checkbox"/> Email <input type="checkbox"/> WhatsApp <input type="checkbox"/> (Brigaders only) Other <input type="checkbox"/> Company should specify here:	
None of the above <input type="checkbox"/>	

Child/young person's details (the rest of this form is to be completed by a parent)

Name:	Date of birth:
Address:	Church attended:
GP name & practice address:	GP telephone no:
Details of any known medical conditions, allergies etc. (eg. asthma, diabetes, epilepsy) and any medication being taken:	
Any other relevant special needs, requirements or directions that would be helpful for leaders to know:	
Does the young person have: Impaired hearing Yes <input type="checkbox"/> No <input type="checkbox"/> Impaired vision Yes <input type="checkbox"/> No <input type="checkbox"/> Other disability Yes <input type="checkbox"/> No <input type="checkbox"/> Please detail:	
Is she taking any medication/treatment? Yes <input type="checkbox"/> No <input type="checkbox"/> Please detail:	
If the medication is needed during GB and the child is unable to administer the medication herself, please contact the Company Captain. You will need to supply written permission for a leader to administer medication along with a letter from the GP stating that the leader in charge/first aider can administer the medication. Your note should include details of the medication, dosage and frequency.	
Contact 1 (must be a parent/carer*) Name: Relationship to child: Tel. day Tel.eve..... Mobile..... Email	Contact 2 Printed name: Relationship to child: Tel. day..... Tel.eve..... Mobile
(for company contact purposes)	

Consent (Consent must be provided by an adult with parental responsibility*)

*See The Children (NI) Order 1995 Article 6 (i) Natural mother always has parental responsibility. Natural father gains parental responsibility: • If married to mother at time of birth or subsequently marries her • Through an Agreement witnessed by solicitor or a Parental Responsibility Order. • Post 15 April 2002 if they jointly register the baby's birth.

PHOTOS/VIDEO

During the time your daughter spends at GB, photographs/video may be taken for general church purposes (eg. church website, noticeboard, church/GB Facebook page etc.) and GBNI promotional purposes to include internal and external publication and GB websites (eg. GBNI website, Facebook, Twitter, Flickr, YouTube etc). GBNI guidance for the use of photographs/videos will be followed, a copy of which is available from GB Captains or from the GBNI office.

Do you consent to your daughter’s image to be taken and used as indicated?

Yes [] No [] *please tick as appropriate*

COMMUNICATION USING IT

Leaders may use the methods indicated on page 1 to get in touch with the Section your daughter is part of this year (eg. WhatsApp/text/email.) Such use will be limited to communication about Girls’ Brigade activities.

Do you consent to your daughter being contacted by leaders using the methods indicated in section 1 of this form?

Yes [] No [] *please tick as appropriate*

FIRST AID/EMERGENCY TREATMENT

In the event of illness or accident, having parental responsibility for the above named child, I give permission for first aid to be administered where considered necessary by a trained first aider, if available or medical treatment to be administered by a suitably qualified medical practitioner.

In the case of an emergency, leaders will do everything possible to contact the parents.

Yes [] No [] *please tick as appropriate*

DATA CONSENT

Please read the follow DECLARATION STATEMENT and only sign if you agree with how personal data will be used.

The data collected on this form is held for the sole purpose of GBNI and will not be distributed to any third party organisations. GBNI only requires the requested personal information for GBNI related business. Records will be kept securely on file by the Company Captain/Acting Captain or Correspondent for a period of seven years after which point these forms will be destroyed.

All members have the ‘right to be forgotten’ and can request for a check on what details has been stored about them. However, due to any potential child protection, health and safety or security issues, information may need to be retained for a period of 30 years, if GBNI deems this necessary.

Only complete this section if child is aged 15 and under

I permit the named GB company to use the data enclosed on this form regarding my daughter and for both people listed as emergency contact.

Signature of parent/guardian: Date:
(if aged 15 and under)

Only complete this section if child is aged 16 and over - Please note: GBNI are legally required to ask all members aged 16 and over for permission to use their personal information contained within this document.

I permit the named GB company to use my personal data enclosed on this form.

Signature of member: Date:
(if aged 16 years and over)

I permit the named GB company to use the data enclosed on this form for both people listed as emergency contact.

Signature of parent/guardian: Date:
(if aged 16 and over)

CONSENT TO PARTICIPATE

I permit my daughter to take part in the Girls’ Brigade company stated above and confirm that she is willing to participate as fully as possible. All details provided on this form are as accurate and up to date as possible.

Printed name: Relationship to child:

Signature: Date:

It is essential that you inform leaders of any important changes to the details given on this form during the year eg. telephone numbers

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