

GSSC PERMISSIONS FORM



Name of Student:

I give permission for my child to be involved in the following areas of the curriculum:

1. Swimming YES / NO
2. Participate in Rebound and Trampoline Lessons YES / NO
3. Transportation into the community by:
 - a) Public Transport YES / NO
 - b) School Minibus YES / NO
 - c) Private Cars - driven by a teacher/support staff YES / NO
 - d) Hired Coach (after risk assessment) YES / NO
4. Sex Education as part of general health education. YES / NO
5. For any medicines to be given by school staff following my instructions YES / NO
6. Timetabled outings to local shops, educational venues, etc.
 - accompanied by a teacher YES / NO
 - accompanied by support staff YES / NO
7. Showering/hair washing after PE sessions YES / NO
8. Massage sessions under the supervision of trained staff YES / NO
9. A group leader to administer regularly prescribed lunchtime medication to my child should they be out of school on an educational visit or trip. YES / NO
10. Photographs:
 - a) For educational purposes (in school only) YES / NO
 - b) For Education and Training purposes-other Professionals YES / NO
 - c) As part of a group included within another students
 - d) Annual Review Documents/residential DVD's YES / NO
 - e) For use on GSSC website/LEA website YES / NO
 - f) For school media (newsletters and outside presentations) YES / NO
 - g) For external media (publication in the local press) YES / NO
 - h) For external media websites/presentations (Social Media) YES / NO
11. Videos:
 - a) For educational purposes (in school only) YES / NO
 - b) For Education and Training purposes-other Professionals YES / NO
 - c) As part of a group included within another students
 - d) Annual Review Documents/residential DVD's YES / NO
 - e) For use on GSSC website/LEA website YES / NO
 - f) For school media (newsletters and outside presentations) YES / NO
 - g) For external media (publication in the local press) YES / NO
 - h) or external media websites/presentations (Social Media) YES / NO

Signed: _____ (Parent/Carer)

Date: _____