



# Combined Parental Consent Form

This covers your child throughout their time at the school

## PARENT/ CARER TO COMPLETE THIS PAGE

Child's Name: \_\_\_\_\_

Form: \_\_\_\_\_

✓ or ✗

<p><b>Privacy notice</b> I am aware of the School's Privacy Notice explaining how we store data on the school's management systems and share this data with those who only provide services to the School and organisations concerned with the welfare of my child.</p>	
<p><b>School trips, sports fixtures, off-site provision, events (including careers and sex education programmes)</b> I give my consent for my child to take part in on/ off site activities arranged by the School including those outside the normal School day. This may involve being transported on external coaches and taxis and if necessary, in staff vehicles. If you don't give consent for any of these activities please state which ones.</p>	
<p>I give my consent for my child to take part in careers information advice and guidance events and the relationships and sex education programme.</p>	
<p><b>Publications</b> I give my consent for photographs and filmed images of my child to be used for promotional purposes in the local media (sometimes social media) and school website.</p>	
<p><b>Using email &amp; mobile telephone numbers to contact me</b> I give my consent for the school to use my email address and/ or my mobile telephone number to communicate messages to me about my child/ the school.</p> <p><b>My email address is:</b> _____</p> <p><b>My mobile number is:</b> _____</p> <p style="text-align: center;"><b>HAVE YOU DOWNLOADED THE 'SCHOOLGATEWAY' APP?</b></p>	
<p><b>Bio Registration</b> I consent to my child's finger scan being taken to enable them to use the school's cashless catering system and library system.</p>	

Print Name: \_\_\_\_\_  
Parent/Carer

Signature: \_\_\_\_\_  
Parent/Carer

Date: \_\_\_\_\_

**Please ensure this form is completed and returned to school**

You have the right to withdraw your consent at any time. To withdraw your consent, please email: [enquiries@sjf.wigan.sch.uk](mailto:enquiries@sjf.wigan.sch.uk) OR write to: The Headteacher, St John Fisher Catholic High School, Baytree Road, Springfield, Wigan, WN6 7RN. You should address all correspondence relating to withdrawing consent with the heading WITHDRAW CONSENT followed by your name. Once we have received notification that you have withdrawn your consent, we will no longer process this information for the purpose or purposes you originally agreed to, unless we have another legitimate basis for doing so in law.