



Newbridge Youth Project

Unit 10,
Charlotte Mall
Newbridge
087 1210054
045 435672

Newbridge Youth project Parental Consent Form

Kildare Youth Services

| 1. | |
|-------------------------------|------------------------------|
| Name of Young Person: | Address |
| Date of Birth: Age: | Home telephone: Mobile: |
| Parent /Guardian Name: | Address: |
| Relationship to young person: | Home phone: Mobile phone: |
| Emergency contact person: | Address: |
| Relationship to young person: | Home phone: Mobile phone: |

2. Medical/other need

Please indicate if young person named above

- A) Has any medical condition _____
- B) Is taking specific medication _____
- C) Has any special dietary requirements _____
- D) Has any fears/phobias _____
- E) Has any other particular need _____

Name of Family Doctor _____

Address _____

Telephone number(s) _____

In the case of an emergency, staff will do everything reasonable to contact parent/guardian named above. In circumstances where medical treatment is required immediately and where it is not possible to contact those named above, I authorise any of the staff members of the Youth project/club to refer (name of young person) _____ to a medical practitioner or emergency services on my/our behalf

Parent/Guardian signature _____ Date _____

3. Consent for photograph/video usage

In course of programmes and activities run by the Youth Project/club, youth workers and young people may take photographs and video footage. This will be done using equipment owned by the Project/club. (The use of personal mobiles phone to take photographs and video footage is not allowed.) The images taken will only be used for appropriate display in project/club/Kildare Youth services publications.

Please tick appropriate response

I agree to the use of images as outlined above

I do not agree to the use of images as described above

4. Consent for Internet Access

The Youth Project may provide young people with access to computer technology or internet. I understand that every reasonable precaution will be taken by the Youth project/club to provide for online safety.

I consent to (young person name) _____ accessing computer technology and internet.

I do not consent to (name of young person) _____ accessing computer technology and internet

The youth project/club provides a wide range of non-formal education programmes and activities for young people for example weekly groups based programmes, outdoor education, drop in, youth forums, and other interest groups.

I'm aware that from time to time groups may need to be cancelled at short notice and staff will notify me and/or my son/daughter of any changes by text

I consent for staff to contact (young person name) _____ by text

I do not consent for staff to contact (young person name) _____ by text
(note: staff will contact young people using project/club mobiles only)

I give permission for (name of young person) _____ to participate in a range of programmes and activities provided by *(Insert name of Project/youth club)* _____ at its premises *(insert address)* _____. I'm aware that I will receive written notification in advance, where activities/programmes will take place outside of the normal Youth Project/club location and/or time.

Parent/Guardian signature _____ Date: _____

GDPR Compliance and Privacy Protection

The personal data and other information collected in and retained from this consent form is done in strict compliance of the General Data Protection Regulations (GDPR) 2018. The use of your personal information, how and why we collect it and what we retain will vary depending on how you engage with Kildare Youth Services, and what service, project or club you engage with. This will be made clear in the consent form and/or with other relevant documentation or policies that we will provide to you.

We have outlined how we protect and manage the data to submit to us through the KYS GDPR Compliance and Privacy Statement. You can check this by going to our website www.kys.ie and viewing our GDPR Compliance and Privacy Statement.

6. Received by Youth Project/club

Youth Worker/Leaders _____ Date: _____