

# PARENTAL CONSENT FORM

SUMMER COURSES AT BOSWORTH INDEPENDENT SCHOOL, CATS CAMBRIDGE, GUILDHOUSE SCHOOL LONDON, THE WORTHGATE SCHOOL, CSVPA & STAFFORD HOUSE STUDY HOLIDAYS



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This Parental Consent Form is to be completed by a parent or legal guardian of students under the age of 18 years old that are booked on a summer course offered by Bosworth Independent School, CATS Cambridge, Guildhouse School London, The Worthgate School, CSVPA & Stafford House Study Holidays.

Bosworth Independent School, CATS Cambridge, Guildhouse School London, The Worthgate School and CSVPA summer courses are booked and managed in association with Stafford House Study Holidays

To enable us to look after your child and to ensure that they are safe and happy while in our care, please can we ask you to complete the form below. Please can you provide as much detail as possible and provide honest and accurate responses. We thank you for taking the time to complete the form.

Please complete this form in **CAPITAL LETTERS** in black ink.

STUDENT DETAILS	PARENT/LEGAL GUARDIAN DETAILS
Student's full name:	Your full name:
Student's mobile phone number:	Relationship to student:
Centre:	Your email address:
Arrival Date:	Your mobile phone number:
Departure Date:	Your home phone number:
Sales Representative (full name):	Your work phone number:

MEDICAL CONSENT FORM	
<b>Does your child have any medical conditions that you wish to disclose? If yes, please complete the medical consent form below</b>	
Has your child ever suffered from a serious medical condition? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify:
Does your child have any other current medical conditions? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify:
Is your child currently undergoing a course of medical treatment? Yes <input type="radio"/> No <input type="radio"/>	If yes, which medicines do they take (please also specify dosages/frequency)?
Is your child currently prescribed any long-term medication? <i>Please note that your child will need to bring enough medication for the duration of their stay</i> Yes <input type="radio"/> No <input type="radio"/>	If yes, which medicines do they take (please also specify dosages/frequency)?
Does your child carry any lifesaving medication (for example: an EpiPen)? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify:
Does your child have any developmental or learning difficulties? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify. This is to help us accommodate their needs as best as we can.
Does your child have any physical disabilities that would require us to make any adjustments? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify. This is to help us accommodate their needs as best as we can.
Does your child have, or has previously had, any mental health concerns? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify. This is to help us accommodate their needs as best as we can.
Does your child suffer from asthma or a cardiac condition? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify:
Does your child have any allergies? Yes <input type="radio"/> No <input type="radio"/>	If yes, please specify and indicate how severe the allergy is:
Do you consent for your child to be given non-prescription if appropriate (paracetamol/aspirin) painkillers? Yes <input type="radio"/> No <input type="radio"/>	
Is there anything else that you would like to tell us about your child?	

We want our students to have the care and support they need to have a full and enjoyable experience at Stafford House. There may be circumstances where we cannot provide the required level of care and in these cases we may not be able to continue with the application. Please refer to our terms and conditions for more information.

**Now please read the statements on the next page and sign at the bottom of the page**

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## PARENT/LEGAL GUARDIAN'S SIGNATURE

I understand that by signing below, I give my consent as follows:

- I consent to Stafford House International and Stafford House Study Holidays processing my child's allergies/disabilities/medical conditions information that I have provided as part of this application.
- I consent to Stafford House Study Holidays acting on my behalf in case my child has a medical emergency, and I consent for a qualified state-doctor to give any medical treatment necessary, including an operation and/or the administration of an anaesthetic if I cannot be contacted.

<b>Signed:</b>	<b>Date:</b>
	You have the right to withdraw your consent at any time by emailing the CATS Colleges Data Protection Officer on <a href="mailto:DPO@catscolleges.com">DPO@catscolleges.com</a>
Parent/Guardian Level of English Spoken:	<input type="radio"/> I can accept and understand calls/emails in English
	<input type="radio"/> English may be difficult. If possible please contact me in my native language

## PHOTOGRAPHY & VIDEO

Stafford House Study Holidays and/or its representatives may take photographs or video footage of students participating in activities for promotional and marketing purposes. Photographs and video footage may be used on Stafford House Study Holidays website, social media channels and printed materials.

- I understand that Stafford House Study Holidays may take photographs or video footage of students at their centres.
- I consent that the photos or video footage may then be used for promotional purposes for Stafford House Study Holidays.
- I consent that the photos or video footage may be used on Stafford House Study Holidays social media channels, including but not limited to Facebook, Instagram and TikTok.
- I understand that by signing below, I acknowledge and confirm that I give consent to this.

<b>Signed:</b>	<b>Date:</b>
Please print, sign by hand (in black ink) and scan	

## PARENT/GUARDIAN AUTHORISATION (ONE SIGNATURE FOR ALL, AT BOTTOM OF STATEMENTS)

### Student welfare and school rules

- I authorise Stafford House Study Holidays to look after my child's welfare for the duration of the course.
- I confirm that my child has read and will follow your School Rules and Anti-Bullying Policy which can be found at [www.studyholidays.com/school-rules](http://www.studyholidays.com/school-rules)
- My child and I understand that there are consequences for breaking school rules and UK laws including: theft, vandalism, bullying, buying or consuming alcohol, cigarettes or drugs. If they break any school rules or UK laws, students may receive sanctions or be sent home. I agree that if my child is sent home early, I will be available to accept them back into my care or will nominate, and give written consent to, a suitable adult to act in my place. Flights home will be at the cost of the parent/legal guardian.
- Students may be given free time privileges to leave the centre (within certain boundaries) in small groups during the day in agreement with their GL and centre team. This is not available to students between 8 and 11 years old. Students aged between 12 and 15 are allowed up to 1 hour and those 16 and above a maximum of 2 hours. School rules, signing out and location sharing procedures must be followed and these privileges can be revoked at any time.
- If my child comes to the centre with a Group Leader, I give permission for them to take my child with the group off-site and away from the planned programme.
- My child is aware that they must not invite visitors onto the school campus or into any school building without prior authorisation from Stafford House Study Holidays.

### Lessons, activities and excursions

- I understand that Stafford House Study Holidays provides a complete programme of lessons, activities and excursions, and my child will participate in the full programme.
- I consent for my child to take part in the Stafford House Study Holiday's activities programme which may include sports, arts and crafts, drama, dance, team games, workshops, quizzes, discos, talent shows and other activities.
- I consent for my child to take part in the Stafford House excursion programme, including local visits, and I understand that my child may be given some free time if appropriate to do so. The amount of free time given will depend on the location, age of the students, and factors such as the weather and how busy the area is. It may be the case that 12–15-year-olds will have less free time (1 hour) than 16–17-year-olds (2 hours). A monitored meeting point will be arranged so students are able to return at any time. Students between 8 and 11 years old are not allowed free time on excursions and will need to remain with their group leader or a member of staff.
- I consent for my child to travel accompanied by the school staff by train, bus, underground/subway, coach or taxi when needed

### Classic PLUS Course students only

- I consent for my child to take part in one of the following professionally supervised activities (these activities are offered as Classic PLUS courses for an additional supplement fee at the centres indicated next to each activity). **Please note:** You only need to select an activity if your child has booked one of the below Classic PLUS courses:

Adventure Activities (Oakham)  Horse Riding (Oakham)  Tennis (Oakham)  Watersports (Bournemouth)

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## Homestay accommodation students only

- I give permission for my child to stay in a host family carefully selected by Stafford House Study Holidays, with other students aged under 18
- I understand that my child may travel to/from school unaccompanied

## Data protection

- To deliver education and protect students' welfare, Stafford House Study Holidays will collect, keep and otherwise process personal data, including sensitive and special category personal data (as defined in the DPA and GDPR respectively) that relates to the student and their circumstances. We will always keep this information secure and we will share it within Stafford House Study Holidays as necessary to run our business, deliver the student's education and ensure their safety. We will also release the data where it is legally required or lawful to do so, or in the event of a medical emergency if it is necessary to protect their health or the health of others. I consent to my child's data being stored, processed and released by Stafford House Study Holidays in this way. I consent to my child's sensitive personal data, which may include: personal data revealing racial or ethnic origin; personal data revealing political opinions; personal data revealing religious or philosophical beliefs; genetic data; biometric data (where used for identification purposes); data concerning health; data concerning a person's sexual orientation and other data being stored, processed and released by Stafford House Study Holidays in this way. A copy of our full privacy notice can be found at [www.catsglobalschools.com/info/privacy-notice.htm](http://www.catsglobalschools.com/info/privacy-notice.htm)
- I understand that Stafford House Study Holidays, to ensure my child's wellbeing, may share my child's information with centre/school staff and relevant service providers i.e., catering/accommodation

## Consent form and terms & conditions

- I confirm that, to the best of my knowledge, the information given in this form is correct and complete.
- I confirm that I and my child have read and accept the Terms and Conditions of Stafford House Study Holidays.

## PARENT/LEGAL GUARDIAN'S SIGNATURE

I understand that by signing below I acknowledge and agree to the above statements.

<b>Signed:</b>	<b>Date:</b>
Please print, sign by hand (in black ink) and scan	
	<b>When you have finished, please print this PDF, sign by hand (in black ink) and scan</b>