



Beauchamps High School

Consent Form

NAME:

DATE OF BIRTH:

CONSENT TO SCHOOL USE OF PHOTOGRAPHY

I consent to my child appearing in pictures used for the publicity purposes of the school. Full names will not be shown

Yes

No

CONSENT TO OFF-SITE ACTIVITIES

I consent to my child being permitted to attend off site visits/fixtures while attending Beauchamps High School

Yes

No

CONSENT FOR CASHLESS CATERING SYSTEM

I give consent for my child's biometric data to be held by the school and shared with the school's chosen catering provider

Yes

No

CONSENT FOR MOBILE PHONE IN SCHOOL

I wish my child to have a mobile phone with him/her in school

Yes

No

Mobile Phone Number: _____

The reason I wish my child to have a mobile phone with him/her in school is:

I acknowledge that the school accepts no responsibility for loss or damage to my child's mobile phone whatever the circumstances.

Please note that you can opt-out or opt-in at any point. To do so please contact the school

admin@beauchamps.essex.sch.uk

Name of Parent/Guardian

Signature

Date

All information given will be treated as confidential and all data is stored in compliance with GDPR regulations.

www.beauchamps.essex.sch.uk/gdpr/