

Strawberry Hill Ballet School (SBS)

3) **Consent Forms** (printable)

3.1 Photography & Video Consent

- STUDENT NAME/DOB: _____
- I give permission for SBS to:
 - ☐ Take photos/video during classes/rehearsals/shows
 - ☐ Use images in: ☐ School website ☐ Social media ☐ Printed materials ☐ Press
- CONDITIONS: No images in changing areas or toilets. Identifying info kept minimal. Consent may be withdrawn in writing at any time.
- PARENT/CARER NAME: _____ SIGNATURE: _____ DATE: ____/____/____

3.2 Emergency Medical Consent

- MEDICAL CONDITIONS/ALLERGIES: _____
- GP NAME & PRACTICE: _____
- I consent to a qualified first-aider providing first aid and, if required, medical treatment in an emergency when a parent/carers cannot be contacted.
- PARENT/CARER NAME: _____ SIGNATURE: _____ DATE: ____/____/____

3.3 Transport Consent (Staff/Approved Adult)

- EVENT/DATE: _____ ROUTE: _____ DRIVER: _____
- I consent to my child being transported by an approved adult in accordance with SBS policy and risk assessment.
- PARENT/CARER NAME: _____ SIGNATURE: _____ DATE: ____/____/____

3.4 Off-site Trip/Show Consent

- EVENT/VENUE/DATE/TIME: _____
- TRAVEL METHOD/SUPERVISION RATIOS: _____
- COST/PAYMENT DUE: _____ COLLECTION POINT/TIME: _____
- I consent to my child attending the above trip/show and understand the arrangements and expectations.
- PARENT/CARER NAME: _____ SIGNATURE: _____ DATE: ____/____/____