EMERGENCY CONTACT INFORMATION

CHILD'S NAME:		ADDRESS:	
CHILD'S DATE OF	BIRTH:		
CLASS:			
PLEASE GIVE ONE TO BE SENT TO:	(1) TELEPHONE N	IUMBER ONLY FO	R TEXT MESSAGES
HOME TEL. NO:			
MOTHER'S NAME: MOTHER'S MOBILI	E TEL NO (IF APPLI	CABLE):	
FATHER'S NAME: FATHER'S MOBILE	TEL NO (IF APPLIC	CABLE):	
MOTHER'S WORK	DETAILS, PLACE &	TEL NO ETC. (IF A	PPLICABLE):
FATHER'S WORK I	being unable to contac	`	PPLICABLE): y, please give details below of
NAME	ADDRESS	TEL NO	RELATIONSHIP
1.			TO CHILD
2.			
3.			
	(Parent/Gua all be used to create and upda ad for statistical analysis and	ite your child's educational i returns. Information will on	completed: ecords. It will be used to update ly be disclosed to other professionals
(We appreciate that some par	rents/guardians may have alre	eady notified school of chan	ges but we would appreciate your co-

Thank you.

D Humphries (Headteacher)

PLEASE ALSO COMPLETE OVERLEAF

operation in the completion of this form in order to help us to maintain our computerised records.)

Aston Hall J & I School

CONSENT FORM FOR PHOTOGRAPHS

Name of School: ASTON HALL J & I SCHOOL	
Name of Child: Class:	
Name of Parent/Guardian:	
It has been common practice for schools to take and display photographs of childre school. As under new legislation such photographs constitute data we now require them.	
Thus before displaying photographs we require your permission.	
Please complete the following:	
1. May we display any photographs including your child in school or a part of display in other educational establishments?	a school YES/NO
2. May we display an y photographs including your child in school publication (eg the school prospectus or newsletters etc.)	ns? YES/NO
3. May we display any photographs including your child on the school website (Child's name WOULD NOT be included).	e? YES/NO
May we release photographs for publication in other situations? Such as:	
Press (or allow press to photograph your child in school)	YES/NO
Department for Education and Skills	YES/NO
Sports clubs following their involvement in school	YES/NO
Signed(Parent/Guardian)	
Print Name	
School WILL carefully consider the suitability of each photograph/photographic of display/publication.	pportunity for

This form remains valid for 7 years unless parents wish to change any part of it.

School WILL NOT identify children by name or address.