

Child and Guardian Joint Consent for Role of Church Steward in the Diocese of Killaloe

Data protection

The information on the form will be retained in connection with your/your child's participation in a diocesan/parish event or activity. The information in this form will usually be deleted within 6 months' after you/your child finishes participating in such events. However, there may be circumstances where the information may need to be retained for a longer period. For further information, please see our Privacy Policy.

Group details (to be completed by organiser)	
Role: Church Steward	
Duration/frequency of activity	
Name of organiser	
Details of the child/young person	
Name of young person	
Address	
Date of birth	
Gender (circle as appropriate) Male Female	
Contact information of young person (for emergency use only)	
Other relevant information	
(Please mention any medical conditions, special needs or dietary requirements).	
Please note that the organisers <u>cannot administer any medication</u> . Should your child require me intimate care, please discuss this with the organisers who will work with you to establish how your accommodated, according to relevant policies and procedures.	



Guardian Contact Details Name Daytime phone number Code Local no. Home phone number Code Local no. Mobile number_____ Email In cases of a medical emergency In the event of illness or an accident, I give permission for medical treatment to be administered to my child, where considered necessary, by a suitably qualified medical practitioner and/or hospital. I understand that every effort will be made to contact me as soon as possible. In an emergency I can be contacted at the telephone numbers provided on the previous page: Signed_____ Child's/young person's consent I ______(insert full name) would like to become a Church steward as listed on the previous page. (If relevant please tick the boxes below) ☐ I understand that photographs may be taken, and I give my permission for these to be used in any hard copy/online (delete as appropriate) publications by the ______ (insert name of Church body). ☐ I understand that videos (which may include webcam) may be taken, and I give my permission for these to be used in any hard copy/online (delete as appropriate) publications by the ______ (insert name of Church body). ☐ I understand that I will be appropriately supervised at all times. **Guardian's Consent** I agree to allow the above-named child/young person to become a Church Steward. I understand that there will be suitable supervision while the children/young people are in the care of the organisers. ____Name: (block letters) ___ Signed: Guardian Guardian Relationship to child/young person:

Signed:

Child/young person