DIOCESE OF CLOYNE

Child and Guardian Joint Consent Form 2

The Diocese of Cloyne values and encourages the participation of children in the life of the Church and is committed to best practice, which protects children from harm and abuse. As staff, volunteers, clergy and religious in this Diocese, we accept and recognise our responsibilities to develop an awareness of the issues which cause children harm. If you have concerns about any church activity please contact the Diocesan Director for Safeguarding. For more information, please visit our website www.cloynediocese.ie

please visit out we	ebsite <u>www.cioy</u>	nediocese.ie						
Name of Parish								
Activity / Group / event								
Name of Child / Young Person								
Address								
Date of Birth		School Attending				Class		
Name of Parent / Guardian								
Home Tel. No.				Mobile Tel. No.				
Give details of any medical condition								
Please include details of any medication which has to be taken or any dietary requirements. Please ensure that your child has any medication he or she might require and knows how to administer same. This information will be treated with confidence.								
Details:								
In the event of an emergency I authorise the administration of any medication which has been prescribed by a medical professional.								
Signed								

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	Child & Parent / Guardian Consent						
M	My Child does □ does not □ have permission to walk home alone from the church.						
	Parents are reminded to drop off or collect children and young people promptly from all activities. Only those with signed permission will be allowed to leave unaccompanied.						
((If relevant please tick the boxes below)						
(I understand that photographs may be taken during the group activities, and I give my permission for these to be used in any hard copy/online (delete as appropriate) publications by the Diocese of Cork and Ross 						
(I understand that videos (which may include webcam) may be taken during the group activities, and I give my permission for these to be used in any hard copy/online (delete as appropriate) publications by the Diocese of Cork and Ross 						
 I understand that during group activities I will be appropriately supervised at all times and will agree to abide by the group's code of behaviour. 							
	O '	0	T	D - 4	_		
	Signed (Parent/	Guardian)		Dat	е		
	Signed (Child/Yoperson)	oung					
l	OFFICE USE ONLY						
Received By			ı	Date			

Data protection

The information in this form will be used in connection with your child's attendance in parish activities. This form will be retained for five years after your child ceases to be involved in parish activity. The data entered will be used only for the purposes indicated on the form. It may be accessed only by those with responsibility for managing files.

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