



Archdiocese of Dublin
Ard Deoise Átha Cliath

St Pius X & St Jude The Apostle Parishes, Templeogue, Dublin 6W

PARENT/GUARDIAN & CHILD JOINT CONSENT UNDER 12 YEARS OF AGE

1.0 Data Protection

This form will be held on file, in accordance with the data protection policy of The Archdiocese of Dublin. The data entered will be used only for the purpose indicated on the form. It may only be accessed by those with responsibility for managing records or group activities. This form will remain effective for as long as the child participates in St Pius X and St Jude The Apostle Parish activity.

2.0 Group details

Name of group:

Activity details:

Duration/frequency of activity from

Name of Organiser:

3.0 Details of child

Name of child _____

Address _____

Date of Birth _____ Class _____

4.0 Other Relevant Information

(Please mention any medical conditions, special needs).

Please note that the organisers **cannot administer any medication.** Should your child require medication or intimate care, please discuss this with the organisers who will work with you to establish how your child can be accommodated.

5.0 Parent/Guardian contact details

Name _____

Address _____

Contact number _____

Mobile Number _____

Email address _____



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6.0 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 numbers provided on the previous page:

Signed _____

7.0 Parent/Guardian's Consent

I agree to allow the above-named child to attend _____ at the times and dates stipulated in section 2.0.

I understand that there will be suitable supervision and an agreed code of behaviour while the children are in the care of the organisers.

I agree to allow my mobile number to be added to the appropriate WhatsApp group and it being visible to other members of this group. You may opt to leave the group at any time and your number will be automatically removed from the group. The purpose of this WhatsApp Group is to share information and news specifically relating to the group involved and must not be used for any other unconnected purpose or for personal use. Communicating within the WhatsApp group should be considerate and respectful to others showing the same level of courtesy that you yourself would expect to receive. Please do not share content that could be interpreted as inappropriate, demeaning, or inflammatory. Please do not discuss or share child information or share confidential information about the group. Activity on WhatsApp group will be monitored, and inappropriate activity may lead to removal from the group. If you have any queries or concerns about the group or its content, please discuss with the group administrator.

8.0 Parent/Guardian's Consent

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 publications by St Pius X & St Judes YES ☐ NO ☐

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 publications by St Pius X & St Judes

YES ☐ NO ☐

I give permission for my child to attend any outing during the year with the St. Pius & St Judes Children's choir.

YES ☐ NO ☐

Signed _____
Parent/Guardian

Name (Block Capitals) _____

Relationship to child _____

Signed _____
Child