

## **ADMINISTERING MEDICATION AND PHOTOGRAPHY CONSENT**

## **Administering Medication and Photo Written Consent Form**

To ensure we are complying with Ofsted guidelines and best practice, we require all parents to complete the below this opt in form. Please note your child will not be able to attend without this for being completed.

completed.	
Administering Paracetemol (Calpol)	
In the event that your child has a high temperature, do you give consent for our staff to administer the	
recommended dosage amount of infant suspension paracetamol (Calpol) to your child?	
Please complete the following written consent form:	
	Please put an 'X':
Yes, I give consent for the administering of paracetamol in	
case of a high temperature	
No, I do not give consent for the administering of	
medication	
PRINT CHILD'S FULL NAME	
PRINT FULL NAME OF PARENT/CARER	
SIGNATURE OF PARENT/CARER	
SIGNATORE OF TARENTY CARER	
Administrating Antihistamina (Divitan)	
Administering Antihistamine (Piriton)  In the event that your child displays symptoms of an allergic reaction, do you give consent for our staff to	
administer the recommended dosage amount of Piriton (ch.	
Please complete the following written consent form:	iorophenamic marcately to your ema.
Trouble comprete the following written consent for an	Please put an 'X':
Yes, I give consent for the administering of antihistamine	
allergy relief syrup in the event of an allergic reaction	
No, I do not give consent for the administering of	
medication	
PRINT CHILD'S FULL NAME	
PRINT FULL NAME OF PARENT/CARER	
SIGNATURE OF PARENT/CARER	
SIGNATIONE OF TARRENTY GARREN	
Photography / Videos	
There will be occasions whereby photographs or videos will be	
newsletters or advertising. No names will be attached to any photog	
written opt-in consent from you.	
Please complete the following written consent form:	
	Please put an 'X':
Yes, I give consent for my child to be in photos or videos	
for informative or advertisement purposes.	
No, I do not give consent for photos or videos to be taken	
of my child.	
PRINT CHILD'S FULL NAME	
PRINT FULL NAME OF PARENT/CARER SIGNATURE OF PARENT/CARER	
MUNATURE OF FARENT/LARER	