



HILLCREST SCHOOL

East View Avenue, East Farm
Cramlington, NE23 1DY
Tel 01670 713632

Email Admin@hillcrest.northumberland.sch.uk

Mrs A Mead, Head Teacher

PERMISSION FORM

Pupil name (please print) _____

Parent/Carer name (please print) _____ Date signed _____

This permission form will cover **all** of your child's time at Hillcrest School. Please sign the sections you wish to agree to. If at any time in the future you wish to change any of these authorisations, please contact the school office.

- I give permission for my child to take part in local walking outings during school time.

Signed _____ Parent/Carer

- I give permission for my child to be photographed or filmed when the photos are to be displayed within school or sent home for purchase.

Signed _____ Parent/Carer

- I give permission for my child to be photographed or filmed for use on the school's website/prospectus.

Signed _____ Parent/Carer

- I give permission for my child to be photographed or filmed by the media, (press/television) and for my child's name to be released for publication such that the child may be identified as an individual or part of a group.

Signed _____ Parent/Carer

- I give permission for my child to use the Internet. (Northumberland LEA operates a filter system to block undesirable material)

Signed _____ Parent/Carer

- I understand that as part of the school's Design Technology curriculum my child may be asked to taste a variety of foods.

Signed _____ Parent/Carer

- I give permission for my child to take part in sex education lessons.

Signed _____

[Type here]