

Wolverhampton City Council

# Castlecroft Primary School

*Headteacher: Mr A Dyall BA Hons*

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Dear Parents and Carers,

Please will you help us in updating the information we currently hold regarding your child. Enclosed is a data checking sheet and a medical form, data protection form and permission slip to leave the school premises.

## **Data Collection Sheet**

1. Please enter full name, address (**including post code**) and telephone number of contacts.
2. Please ensure that all information on parent/guardian details are correct - e.g. contact priority, nature of relationship, responsibility and legal orders.
3. **\*Please note it is now very important that we have National Insurance numbers and Date of Births for each parent.**

It is essential that we have up to date contact numbers in the event of an emergency. Occasionally children are unwell and it can be distressing for them and frustrating for us when we discover that we have old telephone numbers. Please will you check the information on the data checking sheet and add, delete or amend as necessary. The form should then be returned to school a.s.a.p. **even when no alterations have been made.**

We also enclose a medical form which we update every year. If your child has any medical conditions of which we should be aware, or takes regular medication, please complete the form and return to school.

From time to time we use images of the children at Castlecroft for promotional purposes such as the Prospectus and include some in our website. We will never attach children's names to the images and therefore do not anticipate any problems regarding safety. Our local newspaper often takes photographs of the children too. Please complete the attached slip and return it to school a.s.a.p.

As part of the curriculum, the children will go off site onto the local estate or visit the nature reserve, railway track, canal or even walk to Smestow School for lessons and activities. The children will always be adequately supervised. For visits further afield we will continue to seek specific parental permission. Please can you sign the parental permission form for this also.

Thank you for all your co-operation in completing these many forms, but as always the safety of your child is of great importance to us here at Castlecroft. **Please return both the enclosed forms by Monday 16<sup>th</sup> October 2017.**

Yours sincerely,

Mr A Dyall, Headteacher.

Data Protection

Under the terms of the 1988 Data Protection Act I agree / do not agree to my child \_\_\_\_\_ in Year \_\_\_\_\_ having photos taken for publicity purposes eg Prospectus/Web Site.

Signed \_\_\_\_\_ ( a person with parental responsibility)

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Medical Form

Child's Name \_\_\_\_\_ Year \_\_\_\_\_

Any existing medical conditions? YES  NO

If YES please give details:-

Is any medication needed? YES  NO

If YES please give details:-

Where is medication kept? With teacher  At home

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Permission to leave school premises

I give permission for my child \_\_\_\_\_ in current Year \_\_ to visit the local estate, nature reserve and surrounding area, as part of our curriculum on the understanding that appropriate levels of staffing and necessary risk assessments have been undertaken.

Signed \_\_\_\_\_ (a person with parental responsibility)