

SAFEGUARDING FORM FOR TEENAGERS (out of summer)

**PARENTS or GUARDIANS OF ANY CHILD AGED 13 to 17, MUST FILL IN AND
E-MAIL US THIS FORM IN ADVANCE OF THE COURSE START (office@loxdale.com)**

No student will be given medicine by Loxdale or be allowed to take medicine that they have brought from home unless we have permission from you. If you give your child medicine to take with them to England, please have the ingredients clearly labelled **in English** in case of emergency.

NAME OF STUDENT:

NAME OF PARENT:

Do you speak some English? Yes ☐ No ☐

Telephone no: +

VACINATIONS What was your child's last tetanus injection?

Has your child had two Covid vaccinations?

EXISTING HEALTH CONDITIONS:

Please tell us about any problems or issues with your child's health and well-being. If we are not told in advance about a physical or mental health condition, we reserve the right to terminate his/her course.

Does your son/daughter have:	Asthma or bronchitis	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	A heart condition	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Epilepsy, fits, fainting or blackouts	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Severe headaches or migraines	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Diabetes	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Allergies to known medicine	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Other allergies e.g. materials, food	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Travel sickness	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Bed-wetting/incontinence	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Any history of mental health problems (Including eating disorders or hyperactivity)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Anything else we need to know? _____

Is your son/daughter on regular medicine? Yes ☐ No ☐ If so, what? _____

MILD MEDICINE Yes ☐ No ☐

Senior Staff and hosts may need to give mild medicines such as paracetamol, cough medicine, antihistamine or sore throat tablets to children with minor pains or cold symptoms. Do you allow this?

DOCTOR'S MEDICINE Yes ☐ No ☐

If we take your child to the doctor and he/she recommends a medicine, can we give it to your child?

EMERGENCY HOSPITAL TREATMENT Yes ☐ No ☐

In an emergency, do you give the principal, designated Senior Staff or your child's homestay family permission to sign consent for an emergency operation?

Of course, every effort will be made to contact you as quickly as possible.

NAME OF STUDENT:

PHOTOS

Do you give permission for photos of your child to be used for publicity purposes?

☐ Yes, for social media. ☐ Yes, for the website. ☐ Yes, for brochures. **OR** ☐ No, I do not.

SWIMMING

Do you give your child permission to swim in a swimming pool on school visits? ☐ Yes **OR** ☐ No

TO AND FROM SCHOOL

Students aged 12 years and older normally walk (or get the bus) to and from school by themselves (or with their roommate) during the day. Most students live in the same areas around the school.

I allow my teenager to walk to and from school by themselves during the day Yes ☐ No ☐

I allow my teenager to walk home *after the evening activities* Yes ☐ No ☐

I would like to book a daily transfer to take them to and from school (day & evening) (£70 per week) ☐

I would like to book an evening transfer to take them home after the evening activities (£24 per week). ☐

VISITING THE CENTRE OF BRIGHTON & HOVE

After afternoon activities, school supervision finishes for the afternoon. Students can stay at school to relax, go to their hosts or visit the centre of Brighton & Hove to go shopping or sightseeing. They are not allowed to the beach. Will you allow them to have some free time? All students must be back with their hosts for dinner at 1800.

☐ I am happy for my child to go to town without school **OR** ☐ I do not allow my child to go to town

TRIPS

Sometimes on trips, we allow students to have some free time for shopping in well-chosen areas or shops for one hour in small groups. Do you allow this?

☐ Yes, I give permission **OR** ☐ No, I do not.

Please note that if permission is *not given*, your child will always be accompanied by our staff.

NIGHTS AWAY

Sometimes students have family or friends who live in London or another town/city who they may wish to visit for a weekend or for a day trip. **Please note that if you give permission, we will need the full name, address and contact details of the friend or relative IN ADVANCE and they will need to show ID when collecting your child.** Do you give your child permission?

☐ Yes, for a day trip ☐ Yes and he/she can stay overnight ☐ No, I don't give permission.

Date:	Emergency phone number:
Signed by the parent I agree to this and have discussed the School Rules and Terms and Conditions with my son/daughter	