# **Richard Language College**

## Parental consent form for students aged under 18

We want to make sure that your child is safe and happy while studying in the UK. To help us, we ask you (the parent or legal guardian) to complete this form for any student aged under 18 who is enrolled at Richard Language College. (Please see www.rlc.co.uk for associated documents)

Please note that the student will not be able to start the course until the form is received by Richard Language College

### **Data protection**

We promise to keep this information secure and will only give it to people who are directly involved in caring for your child on a need to know basis during the time when they are enrolled at Richard Language College; this may include healthcare and welfare professionals.

\* indicates a required field

Student details

First name(s)		Fo	imily name		
Gender*: Male	e: Female:	Dat	te of Birth*:		dd/mm/yyyy
Nationality*:		Fir	st Language*:		
Passport Number	*:	Pa	ssport expiry da	te*:	dd/mm/yyyy
Parents' or g	uardians' deta	ils			
1. Primary Co	ontact				
Title:	First	Name*:		Family name*:	
Relationship to ch	ild*:	First	Language*:		
Level of English*:	Strong Good	Weak			
Mobile phone*:			Email*:		
Address*:					
2. Secondary	y Contact				
Title:	Firs	t Name:		Family name:	
Relationship to ch	nild:	Firs	t Language:		
Level of English:	Strong Good	Weak			

	Mobile phone :		Email:				
	Address:						
	Travel						
	I give consent for my son/daughte I understand my child will travel u		study at Richard Language College the school and his/her homestay				
	I agree that my son/daughter can from school to airport/station on d		to and from Bournemouth at the start and end of their course.	se and			
	Only children aged 16 and 17* plete for any under 18:	YES NO	Not applicable				
	Details to UK: Flight no. *:	UK Airpoi	ort*:				
d/mm/yyyy	Date*:	Departure Time*:	Arrival Time*:				
	Return details*:Flight no. :	Home Air	rport*				
d/mm/yyyy	Date*: .	Departure Time*	: Arrival Time*:				
	Accommodation						
	A: I agree to my son/daughter staying in homestay accommodation arranged by Richard Language College						
	* YES NO If no, see B: He/she understands that he/she must follow the 'school and house rules'.  YES*						
	<b>B:</b> If your son/daughter is staying with family members or is in accommodation arranged by yourself, please give full details:*						
	Name of responsible adult in the accommodation:						
	Date of birth:	Relations	nship to the child:				
	Address:						
	Mobile phone:	Email :					
	(Please see College Safeguarding Policy & See Rules for Under 18s)						
	Curfew times						

NO I agree the following times when my/son daughter must be in their accommodation: \* YES

If NO, then what earlier time is required for your child?

## College latest times:

Under 14 years of age: They must not go out in the evening and weekends without an accompanying responsible adult. 14 & 15 years old. They must be back with your homestay host by 09.30 pm.

16 & 17 years old. They must be back with your homestay host by 11 pm.

dd/mm/yyyy

dd/mm/yyyy

#### Leisure activities

I give permission for my son/daughter to go on any trips organised by Richard Language College and to take part in these activities: (All buttons default to 'Yes' - please change as needed.)

Swimming	i. in the sea independently (16 years and over only)	YES	NO	
	ii. in the sea – with responsible adult (12-15)	YES	NO	
	iii. in a lifeguarded pool (12-17 years)	YES	NO	
Cycling	(16 years and over only)	YES	NO	
Ball games		YES	NO	
Water sports	Supervised by venue staff in addition to RLC staff.	YES	NO	
•	ts (high ropes, rock-climbing, abseiling etc.) venue staff in addition to RLC staff.	YES	NO	
Horse-riding	Supervised by venue staff in addition to RLC staff.	YES	NO	
Archery Super	vised by venue staff in addition to RLC staff.	YES	NO	
Ice-skating	Supervised by venue staff in addition to RLC staff.	YES	NO	
Unsupervised time I give permission for my son/daughter to have free unsupervised time for shopping on trips arranged by Richard Language College (16 & 17 years Only)  YES  NO				
I give permission for my son/daughter to have unsupervised free time in Bournemouth during the time between the end of classes/activities [16:00 approximately ] and the time of the evening meal at their accommodation (14-17 Only)  YES  NO				
	on for my son/daughter to have unsupervised free time in the evening after the everifiew details].			

#### Medical

Please tell us about any problems. If we are not told in advance about a physical or mental condition, we reserve the right to terminate the student's course. (All buttons default to 'No'. Please change as needed)

YES

YES

NO

NO

I give permission for my child to go on day trips independently (16/17 Only)

I give permission for my child to go on day trips with the homestay host. (12-17)

Does your son/daughter have:

Asthma or bronchitis	YES	NO
Heart Condition	YES	NO
Fits, fainting or blackouts	YES	NO
Severe headaches	YES	NO
Diabetes	YES	NO
Allergies to known medicines	YES	NO
Other allergies e.g. materials, food, plasters	YES	NO
Travel sickness	YES	NO
Bed-wetting/incontinence	YES	NO
Any mental health problems (including eating disorders, hyperactivity)?	YES	NO
Is your son/daughter on regular medication?	YES	NO
Does your son/daughter require regular hospital treatment?	YES	NO
Does your son/daughter take any medication which he/she will bring with him/her?	YES	NO

	else we should know about? any of the questions above is YES, ils:	YES	NO
agree to your so	pain or illness such as headache, mild cold or sore throat, do you n/daughter being given non-prescription medication such as ugh medicine, throat pastilles, antihistamine or travel sickness tablets?	YES	NO
Language Colle	emergency do you give permission for a responsible person in Richard ge or in their accommodation to arrange medical treatment. Of course, every de to contact you, the child's parents/guardians, as quickly as possible.	YES	NO
Attendance			
you wish your ch	pected to attend all scheduled classes and activities and to be in their accommoda ild to be absent from the course at any time, please contact the Richard Languag ments can be made.		
Photograph	s and video clips		
	the Richard Language College may take photographs or video clips of students of these images may be used in the Richard Language College publicity or on its s		
I consent for image	ges to be taken.	YES	NO
I consent for image	ges to be used in the Richard Language College publicity.	YES	NO
Long-stay st	cudents Over 5 weeks		
Details of student	's doctor in home country:		
Title: N	ame:		
Address:			
Telephone:	Email:		
When did your so	n/daughter last have a tetanus injection? Date: :		dd/mm/yyyy
I give permission f (General Practition	for my son/daughter to be registered with a doctor ner) in the UK.	YES	NO

## Students aged 16 and 17 who are enrolled on adult courses

I understand that:

- my son/daughter will come into regular contact with other students over the age of 18, in class and during the leisure programme
- he/she is responsible for buying their own lunch during the week (Exceptions: all students on CLAS programme & Integra students booked from France.)
- there are certain British laws (e.g. related to smoking and drinking alcohol) that apply to people aged under 18. As a consequence, there may be some leisure activities which my son/daughter cannot take part in because of their age.

#### Consent

I confirm that the above details are accurate and complete.

I agree to the terms and conditions

I have discussed the agreed arrangements and rules with my son/daughter.

## Signature of the parent/guardian:

I have discussed the agreed arrangements and rules with my parent/guardian.

## Signature of the student:

This document will be considered signed if sent from the parent/guardian's email.