

Select English Consent and Medical Form for Under 18s



Barnardiston Hall

Student Name:	
Date of Birth:	

Title and Full Name of Parent/Guardian:			
Relationship to Student:			
<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Other (please specify)	
Emergency Contact Number:			
Does the person on the emergency phone speak English?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Which language(s) does the person on the emergency phone speak?			

Does your child take any regular medication?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please give details
In the event of a cold, minor injury or illness, we can't administer any medication to your child. We recommend that students bring a small amount of their own non-prescription medication such as paracetamol. Alternatively, we will support them in obtaining medication from a pharmacy during regular opening hours.
EMERGENCY MEDICAL TREATMENT
Can Select English authorise emergency medical treatment in your absence?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If you have ticked No, please advise what action should be taken?

ALLERGIES			
Medication	<input type="checkbox"/>	Plasters	<input type="checkbox"/>
Food or drink products	<input type="checkbox"/>	Insect Stings	<input type="checkbox"/>
Animals	<input type="checkbox"/>	Other: please state below.	<input type="checkbox"/>
GENERAL HEALTH:			
Has your son/daughter ever suffered from any of the following conditions:			
Asthma	<input type="checkbox"/>	Fainting/blackouts	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	Heart problems	<input type="checkbox"/>
Other: (Please detail below)	<input type="checkbox"/>		



If you have ticked any of the boxes above, please provide full details below.

DIETARY REQUIREMENTS:

Halal	<input type="checkbox"/>	Vegetarian	<input type="checkbox"/>
Kosher	<input type="checkbox"/>	Vegan	<input type="checkbox"/>
Gluten Free	<input type="checkbox"/>	Nut free	<input type="checkbox"/>
Lactose Free	<input type="checkbox"/>	Other (Please state)	

AIRPORT TRANSFERS

All students on the Barnardiston Hall course must use the transfer service offered by Select English unless travelling with a parent or guardian.

INSURANCE

Does your child have a European Health Insurance Card (EHIC)? Yes No

If yes, please provide the card number:

Do you have private Health Insurance? Yes No

If yes, please provide the name of the insurer and policy number:

CARE OF UNDER 18'S

- This is to confirm that I have read and understood the **Select English Care of Under 18s Statement**.
- This is to confirm that I have read and understood the Select English **Terms and Conditions**.

AUTHORISATION

FULL NAME OF PARENT OR GUARDIAN:

SIGNATURE:

DATE:



Select English Care of Under 18s Statement



Barnardiston Hall 7-13

ALL STUDENTS ATTENDING A COURSE A BARNARDISTON HALL MUST COMPLETE THE ABOVE CONSENT FORM

- There is a member of staff living on each corridor.
- Students are given safety advice as part of their pre-arrival information. This can be downloaded from our website www.selectenglish.co.uk.
- The activity programme is compulsory.
- Students must attend all off-site excursions unless they are feeling ill. When ill, a member of Barnardiston Hall staff will remain on site.
- Students are given identification lanyards to wear.
- Students will be supervised. Supervision ratios will be determined by the risk assessment carried out for each activity.
- Students will receive three meals a day.
- There will be a member of staff with on-call overnight responsibility at each site and it will be made clear to students who this is and how they can be contacted.

Please return this form to helen.widdall@selectenglish.co.uk



Select English
Cambridge



www.selectenglish.co.uk



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