

## Parental Permission for Staff to Provide Intimate Care

## I understand that:

- I give permission to Eaton House Schools to provide appropriate intimate care support to my child. E.g. changing soiled clothing, washing and toileting.
- I will advise the Head Teacher of any medical reason my child may have which affects issues of intimate care.
- I understand that the intimate care provided for my child at Eaton House Schools will be given by familiar members of staff.
- I understand that the members of staff providing the care for my child have had appropriate training, including in Child Protection.

Child's name:
Date of birth of child:
Class:
Parent/Carer name:
Signature:
Relationship to Child:
Date:
Address and Contact Details: