

Parental permission form for Asda store visit

Please return to:
(teacher and school name) .
by [date 2 weeks before visit]

I understand that my child will be visiting an Asda store at [CLC insert store name and address]

on [CLC insert date of school visit]

Name of child .

Class .

(Please TICK one)

My child does **not** have any known food allergies or special dietary requirements

My child has the following allergies or special dietary requirements (please give details below)

Permission to use photographs (please TICK one)

Yes, I give my consent for photographs of my child to be used (see conditions below).

No, I do not wish any photographs to be taken of my child.

Name of parent/carer:

Signature .

Date

Conditions:

Children participating in the school activities may be filmed or photographed. I give my consent that Asda may, in connection with activities to promote Asda's business:

- Use photographs of my child for internal and external publications. "Publications" means posters, handbooks, magazines, display boards and other publications, in any medium both internal to Asda and also accessible to the general public. Accordingly, I understand that these pictures may be used on the internet, including online social media where they may be widely accessible.
- Enhance these pictures accordingly e.g. removal of red eye.
- Hold these pictures on file to enable Asda to select them at any time for the promotional materials described above.