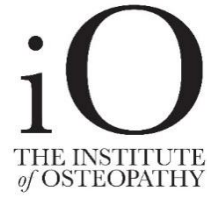


# GDPR PARENTAL/GUARDIAN EXPLICIT CONSENT DATA PROTECTION AGREEMENT

**\*\*Both sides MUST be completed for treatment to start\*\***



## 1. Explicit Consent about your Child's Medical Records

I explicitly consent to you creating and storing medical records concerning the treatment of (print):

....., I understand that this may include details concerning medication, treatment and other issues affecting health conditions, in accordance with the General Data Protection Regulation (GDPR).

I understand that these records will be retained until the child reaches 25, or when the treatment is ceased in order to comply with the Institute of Osteopathy legal guidelines. I understand that these records will be processed in accordance with your 2018 Privacy Notice, a copy of which I have seen.

I have read and understood the above information and have the authority to give explicit consent on behalf of the patient:

Patient's Name (Print again): ..... Date: ...../...../.....

→ Your Signature of Consent: ..... Print Your Name:.....

I am acting in the capacity of parent or legal guardian (please state which) .....

## 2. Our Communication with you as parent/guardian of this Practice Patient

Complete 'A' and 'B'

**'A' - For future appointments and administration (REQUIRED).** Your preferred communication route/s from us is/are (Tick one or several):

PLEASE TRY TO INCLUDE 'MOBILE PHONE & TEXT' AND 'LANDLINE PHONE' (for reasons of speed if urgent)

☐ Mobile phone & Text

☐ Landline Phone - Home or work

☐ Email

☐ Post

☐ Other (please state) .....

**'B' - Promotional Information – This is an 'opt-in', you can change this at any time by eg emailing us**

For the purposes of promoting healthcare including **newsletter, offers and advice** the Practice would also like to stay in touch with you, with information that may be of interest to you.

For providing **promotional** information you can stay in touch with me using the following methods (Tick one or several):

☐ Mobile Phone, including Text

☐ Email

☐ Post

☐ Other (please state) .....

☐ None, no promotional information

→ Signed: .....

Date: ...../...../.....