SAFEGUARDING · POLICY 06

Consent Forms

Programme participation, media and image use, story consent and the young person's own agreement. Print, complete and hold on file.

Document	CYEF consent form pack
Version	1.0
Owner	CYEF Safeguarding Focal Person, Safeguarding Lead
Approved by	CYEF Board of Directors
Date adopted	pending board adoption
Contains	Form A programme participation · Form B media and image use · Form C story and case study · Form D young person's agreement
Retention	Held for the period stated on each form, then securely destroyed under the Data Protection Policy

Notes for CYEF staff

- Form A is completed before a child takes part in any CYEF programme. No form, no participation
- Form B is separate and optional. A guardian may agree to participation and decline photography, and that decision must carry no consequence for the child
- Form C is required in addition to Form B whenever a child's story is told, however briefly
- Form D is completed by the young person themselves. A guardian's signature does not replace it
- Explain each form in a language the family understands. Read it aloud where literacy is a barrier, and note that you did so
- Give the family a copy. Keep the original on the programme file
- Record every consent so that any published image can be traced back to it

> The adidas Foundation and other institutional funders require consent records as part of annual reporting. Completed forms are the evidence. A photograph without a matching form cannot be used in reporting or in an application.

Form A — Programme participation and emergency information

The young person

Full name

_____

Date of birth

_____

Sex

_____

Programme

_____

School, if applicable

_____

Parent or guardian

Full name

_____

Relationship to the young person

_____

Telephone

_____

Home area, for emergency contact only

_____

Second emergency contact

Name

_____

Telephone

_____

Names of anyone authorised to collect the young person

_____

Health

Medical conditions, allergies, medication or anything affecting participation in sport

NHIF or health cover number, if any

Preferred health facility

Agreement

I confirm that I am the parent or legal guardian of the young person named above. I agree to their participation in CYEF programme activities, including training, matches, travel to fixtures and related events.

I understand that CYEF takes reasonable care of participants but cannot remove all risk from sport. I confirm the health information above is accurate and I will inform CYEF of any change.

I authorise CYEF to seek emergency medical treatment for my child if I cannot be reached, and I understand CYEF will contact me as soon as possible.

I have received the CYEF safeguarding summary and I know how to raise a concern.

Signature of parent or guardian

Date

Received by, on behalf of CYEF

Date

Form B — Media and image use

Optional. Declining has no effect on the young person's participation. You may tick some boxes and not others.

Name of young person

_____

What CYEF is asking for

Permission to take photographs and video of your child during CYEF activities, and to use them to show the Foundation's work.

Tick	Where the image may appear
	CYEF website
	CYEF social media accounts
	Printed material such as reports, posters and banners
	Funding applications and donor reports
	Material produced by CYEF partners and funders
	News media coverage of CYEF activities

Tick	Naming
	My child's first name may be used with their image
	No name is to be used. Image only

What CYEF commits to

- We will never publish your child's full name beside their image
- We will never publish a school name or home location with an image
- We will not use an image in a way that is degrading, or that presents your child as an object of pity
- We will keep images on CYEF systems, with access limited to authorised staff
- We will hold images for no longer than **five years** from the date of this form unless you agree otherwise, and will review them annually
- You may withdraw this consent at any time by contacting info@chipukeezyfoundation.org. We will remove the image from everything we control, normally within fourteen days. Material already printed or already given to a third party cannot always be recalled, and we will tell you honestly where that is the case

Signature of parent or guardian

Date

Form C — Story and case study consent

Required in addition to Form B whenever a young person's story is told, in any medium.

Name of young person

_____

What the story is about, in plain terms

Where it will be published

Your rights

- You and your child will see the final text before it is published, and may ask for changes
- You may ask for a different name to be used instead of your child's own
- You may withdraw at any point before publication, and afterwards from anything CYEF controls
- CYEF will not publish details of abuse, family breakdown, health status or legal proceedings
- Nothing has been offered in exchange for this story, and refusing has no effect on your child's place in any programme

Tick	Naming preference
	First name may be used
	Use a different name instead
	No name at all

Signature of parent or guardian _____ **Date** _____

Signature of young person _____ **Date** _____

Form D — Young person's own agreement

To be completed by the young person. Read it with them. Their answer stands even where a guardian has agreed.

Your name

_____

About photographs and filming

Sometimes CYEF takes photos or videos at training, matches and events. We use them to show people what the Foundation does. Before we use any picture of you, we want to know what you think.

You can say no. Saying no will not stop you taking part in anything, and nobody will treat you differently. You can also change your mind later, at any time, and we will take the picture down.

Tick	What you are happy with
	I am happy for CYEF to take photos or video of me
	I am happy for my first name to be used with a picture
	I would rather not be photographed

Keeping you safe

Everyone at CYEF has to follow rules about how they treat you. If anything ever makes you uncomfortable, worried or unsafe, you can tell any adult here, or you can call **Childline Kenya on 116** for free at any time of day or night.

You will never get in trouble for speaking up, and we will listen to you.

Tick	Please confirm
	Someone has explained the CYEF rules to me
	I know who I can talk to if I am worried
	I agree to treat other people here with respect

Your signature _____ **Date** _____

Explained by, on behalf of CYEF _____ **Date** _____

Completed forms are personal data under the Data Protection Act, 2019. They are stored securely, used only for the purposes described and destroyed at the end of the retention period. To withdraw any consent, contact info@chipukeezyfoundation.org or +254 748 390 908.