



STEVENSON TRAINING AND INTERVENTIONS

Sex and relationships education

Booking Details.

School/Academy Details		Booking Details	
	Workshop/Training Date/s		
Telephone:			
Contact Person:	Times		
	Group size		
	Year group		
Workshop Required			
Total Cost:			
Confirmation & Approval:			
Please confirm that all of the times and dates of the sessions are correct. Any cancellation within 5 working days will result in full payment being required. Please make any rooms available 30 min prior to the start of the session. Please sign that you are authorise to make this SRE booking and approval has been given to undertake this/these SRE sessions. Any payments have been authorised.	Name:	Signature:	
	Please do not hesitate to contact Stevenson Training & Interventions on 07931778919 should you have any questions regarding your booking.	Date	



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Consent form.

Details of activity.

Sex & relationship education, part of the wider Personal, Social & Health Education framework.

Within these sessions we will be covering:

Puberty, Menstruation and Reproduction, in year 7.

Teenage Pregnancy, Mother/Fatherhood, Contraception and Delay messages, in year 8.

Substance Misuse & Sexual Health, Fertility, Risk, Consequences & Regret. Saying No, in year 9.

Sexually Transmitted Infections, including HIV & AIDS. Modern Media, Pornography & the Law, in year 10.

Included across all aspects of the Sex & Relationship Education session's, we will be considering young peoples self-esteem, peer pressure and the risk they take and the consequence and regret to their actions.

Confidentiality play's a big part within these session's. Schools set their own confidentiality policy, professional have their own guidelines they adhere to.

A pupils best interests will be maintained.

Pupils are encourages to talk to their parents/carer in relation to any support they might need.

At all times, there will be consideration to child protection and safeguarding issues.

Please complete and return the form below.

I agree/do not agree to _____
(pupil's name) taking part in the schools/academy Sex & Education session's and give my photo consent*

I have read the statement above and I acknowledge the need for my child to participate within these session's and the need for my child to behave in an appropriate manner throughout.

Name: _____

Relationship to child: _____

Parents/cares have the right to withdraw their child from the school's/academy Sex & Relationship Education sessions. If you do not agree to your child's participation within the schools Sex & Relationship Education session's, the schools will make alternative arrangements in this situation.

If you require any further information in regards to what is being included within the Sex & Relationship Education session's, please contact the school/academy and we will be happy to deal with any request.

* Photo consent to be given, as we sometime's take photo's or video footage within the session, to be use for educational purposes and or within other SRE sessions, also with permission on our website.