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Consent Form for young people

Why We Keep Your Information

We are here to support you. To help provide the best care and involve you in activities safely, we need to collect and store some basic personal information about you (such as your name, age, situation, health or legal needs). We will always treat your information with care, and keep it safe and confidential.

What Will Happen With Your Information

- We will keep your personal details secure
- We may use it to support you with services like healthcare, housing, education, legal aid, or other support
- We will share your information only with professionals directly involved in your care — but only when you give us permission
- In some situations (e.g. if there is a serious risk of harm), we may need to share information without your consent to keep you or someone else safe

Your Rights

- You can ask us to stop storing your information at any time
- You can ask to see or update your information
- We will keep your information for (x many years), unless you ask us to delete it earlier
- You can say no to any part of this consent form and still receive support

Contacting Other Adults or Professionals

- ☐ I give permission for staff to contact my parent(s)/carer(s), guardian, social worker, or other professionals involved in my care — only when I have asked them to do so
- ☐ I understand that if there is a serious concern about my safety (or another young person's), the organization may contact someone without asking me first

Agreement

- ☐ I understand how my personal information will be used
- ☐ I agree to take part in activities and support provided by [Your Organization Name]
- ☐ I know I can ask questions or change my mind at any time

Signed by Young Person:

Name: _____

Signature: _____

Date: _____

Signed by Case Worker / Staff Member:

Name: _____

Signature: _____

Date: _____