



Intimate Care Consent Form

Child's Full Name: _____

Date of Birth: ____ / ____ / ____

Parent/Guardian's Full Name: _____

Emergency Contact Number: _____

Intimate Care Agreement

At WhizKid Wonderland Holiday Camp, we are committed to ensuring the comfort, dignity, and privacy of all children while providing necessary intimate care, including assistance with:

- Toileting support
- Changing clothes if required
- Managing toileting accidents
- Supporting personal hygiene (e.g., handwashing)

Our trained staff will always follow safeguarding procedures, maintaining privacy and dignity while encouraging children to be as independent as possible.

Parental Consent

I, the undersigned, give consent for staff at WhizKid Wonderland Holiday Camp to provide intimate care to my child in accordance with the camp's Intimate Care Policy.



I understand that:

Care will be provided discreetly and respectfully.

My child's safety and dignity will be prioritised at all times.

Only trained staff will carry out intimate care.

Any incidents or concerns will be recorded and reported to me as appropriate.

I can withdraw my consent at any time by informing the camp in writing.

Please tick one option below:

- I give consent for my child to receive intimate care as needed.
- I do not give consent for my child to receive intimate care (I understand I will be contacted to attend to my child if required).

Additional Comments (if any):

Parent/Guardian Declaration

I confirm that I have read and understood the Intimate Care Policy and consent to the above terms.

Parent/Guardian's Name: _____

Signature: _____

Date: ____ / ____ / ____

