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## SPEN Database Opt Out Form

Please note, by completing this form you are requesting all information about you/ your child to be removed from the SPEN database.

<b>Name of child/ young person (please print)</b>	
<b>Date of Birth</b>	
<b>Name of parent/ guardian (please print)</b>	
<b>Parent/ guardian signature*</b>	
<b>Child/ young person signature*</b>	
<b>Date</b>	

\*If the child is under 12 years of age, the parent/guardian must sign  
If 12 years or over, but under 16, both the child and his/her parent/guardian must sign  
If 16 years or over, only the individual must sign

Do you wish all information about you/ your child to be removed from the SPEN database? (please delete as appropriate) **YES/ NO**

A copy of this form will be kept in the case notes and a copy will be sent to the database manager for removal of the information.