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## CONSENT FORM

### The Teeth Team Tooth Brushing Programme

Dear Parent/Carer

Your child's school is taking part in the Teeth Team Tooth Brushing Programme and has been fortunate enough to be selected to take part in a study to see if the programme is helping to improve the health of children's teeth.

Teeth Team Limited will be sponsoring the toothbrushes and toothpaste for the school. We will provide a dentist to come into your child's school to check the children's teeth every six months. This dental assessment will not replace your child's usual check-up and you will be informed if your child needs to see your usual dentist before your next scheduled appointment.

Please would you sign the consent slip below and return it to your child's school so that your child can be included in the dental assessments.

Yours sincerely

Chris Groombridge

Director  
Teeth Team Limited

**I give my permission for my child to have regular dental assessments in school as part of the Teeth Team Tooth Brushing Programme.**



Name of Child

Child's Class

Date

Signature (of the PARENT/GUARDIAN)

(Please return this slip to your child's school)