



Written consent form for body piercing of a child under 18 years of age in the CEO's care.

Please note that under section 104A of the *Children and Community Services Act 2004 (the Act)*:

- A person must not carry out body piercing on any of the following parts of the body of a child: the genitals, anal area, perineum, nipples (penalty: a fine of \$18,000 and imprisonment for 18 months). It is not a defence that the child, or a parent of the child, consented to the body piercing.
- A person must not carry out body piercing on any other part of the body of a child unless the person has first obtained the written consent of a parent of the child to carry out body piercing on that part of the child's body (penalty: a fine of \$12,000 and imprisonment for one year).
- Parental consent is not required for piercing the ear(s) of a child aged 16 years and over.
- Section 104A does not apply to body piercing carried out for a medical or therapeutic purpose.

The child on this application is in the care of the Chief Executive Officer (CEO) of the Department for Child Protection and Family Support (the Department), and the CEO may give written consent where the consent of a parent of a child is required or customarily sought (section 127 of the Act).

In the circumstance of body piercing of a child in the CEO's care, the assistant district director and district director have been delegated by the CEO (section 24 of the Act) to provide written approval; this approval takes the place of parental consent.

Piercing business information

Business name: _____

Business address: _____

Business telephone number: _____

Name of piercer: _____

Child's information

Child's name: _____

Child's date of birth: _____

Child's case manager: _____

Case manager's contact telephone number : _____

District Office: _____

Parental consent given for the purpose of section 104A(4)

I, _____ (insert assistant district director/district director's name), give written consent for _____ (insert child's name) to undergo body piercing procedures on his/her _____ (insert location of body part where the piercing will be performed).

Signed: _____ **Date:** _____

Please direct queries to _____ (insert name of child protection worker) on _____ (insert phone number)