



CONSENT FORM FOR SCHOOL EDUCATIONAL VISITS AND OTHER OFF-SITE ACTIVITIES

Please sign and date the form below if you are happy for your child:

- a) to take part in school educational visits and other activities that take place off school premises; and
- b) to be given first aid or urgent medical treatment during any school educational visit or activity.

Please note the following important information before signing this form:

- The educational visits and activities covered by this consent include:
 - all visits which take place during the school day linked to the School Curriculum and accredited courses
 - use of public transport
 - off-site sporting fixtures
 - travel in a staff car providing they have the necessary consent from their insurance company
- The school will send you information about routine educational visits by giving you a copy of the class timetable at the start of each term and of all other educational visits, where possible, at least a week before each visit or activity takes place.
- You can, if you wish, tell the school that you do not want your child to take part in any particular school visit or activity.

We will not ask you again for your permission for the majority of educational visits organised by the school.

Please complete the medical information section below (if applicable) and sign and date this form if you agree to the above.

MEDICAL INFORMATION

Details of any medical condition that my child suffers from and any medication my child should take during off-site visits:

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Child's Name:.....

Name of person with parental responsibility:.....

Signature of person with parental responsibility:

Date: