

Form SOE3a: Parental consent for local off-site activities

PLEASE RETURN TO SCHOOL AS SOON AS POSSIBLE.

Dear parent or guardian

This is a consent form to cover your child's duration at Furzeham Primary School, for undertaking any local off-site trips and visits. These visits may include short journeys on foot or in vehicles and some may continue beyond the school day. Details of each visit will be sent to you in advance. None of these visits includes any adventurous activity, or involves an overnight stay. A separate specific consent form will be sent out for visits involving adventurous activities or for residential visits.

School, college or establishment
FURZEHAM PRIMARY & NURSERY SCHOOL

Outline of planned visits
Various non-residential and non-adventurous activities throughout your child's time at the school.

Name of child	Date of birth
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Special details - any information about your child's health which may need special attention, but does not prevent them from taking part should be noted below. (For example; any allergies, any medication needed and the dosage, travel sickness, diabetes, asthma or epilepsy?)

Has your child had any relevant recent illness?

Does your child have any specific dietary requirements?

Do you have any additional comments?

1. I would like my child to take part in the programme of visits planned for the school year. I understand that the arrangements for each visit will be sent to me in advance.
2. I consent to any emergency medical treatment required by my child during the course of the visit.
3. I confirm that my child is in good health and I consider him/her fit to participate.

**Signature of
parent or guardian**

Date

Name of parent or guardian

Address

Telephone number

Home:

Work:

Name of family doctor

Approximate date of last tetanus injection: