

PARENT'S CONSENT FORM 2019

A residential trip to: **Sayers Croft, Ewhurst from: 15th – 17th May 2019**

I wish my son/daughter(name of child) to be allowed to take part in the above-mentioned school journey and, having read the information sheet, agree to his/her taking part in any or all of the activities described.

I have ensured that my child understands that it is important for his/her safety and for the safety of the group that any rules and any instructions given by the staff in charge are obeyed.

Please delete and complete the following as is appropriate

- My child has **no illness or allergy/the following illness or allergy** *(please delete)*

_____ which necessitates the following medical treatment _____

- I consent to any emergency treatment necessary during the course of the visit.
- **I consent/do not consent*** to my son/daughter being given a mild painkiller (e.g. liquid sugar-free paracetamol) piriton if considered necessary by the party leader. *(*Please delete as applicable)*
- Does your child have any specific dietary requirements? **YES/NO**

If yes, please give details _____

- Please note that your child may be included in any photographs taken during the trip.

Signed _____ (Parent/Guardian) Date _____

ADDRESS	HOME	WORK
	_____	_____
	_____	_____
	_____	_____
Telephone	_____	_____

If not available at the above, please state an alternative contact.

Name _____

Telephone _____