



Parental/Carer Consent Form

Student's name: Tutor Group:.....

Proposed visit and activity(ies) : **CareersFest**

Date of trip: **6 February 2018**

I have read the attached letter for this visit and agree to my son/daughter named above attending and participating fully in the proposed activities.

I agree to inform the Trip Leader of any change in my son/daughter's medical or other condition(s) or any other relevant circumstances before the start of the visit.

I agree to my son/daughter receiving any and all emergency treatment, including anaesthetic and/or blood transfusion, as may be considered necessary by the medical authorities in attendance should the need arise.

I agree to collect my child at the stated time, if applicable.

I understand the extent and limitations of the insurance cover provided (available on the school website).

Name (Please print):

Signed: Date:
(Parent/Carer)

If you have changed your mobile/home/work telephone numbers within the last six months, and you believe your child's SIM record may not up to date, please provide details below:

Home telephone no.:

Mother/Carer mobile tel no. :

Mother/Carer work tel no. :

Father/Carer mobile tel no. :

Father/Carer work tel no. :

PLEASE LIST ANY **RELEVANT** MEDICAL CONDITIONS :

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Please note if you have stated your child has an existing medical condition you may need to provide a doctor's letter stating they are fit to undertake the activities listed if you believe the trip's itinerary and activity may be detrimental to their condition. The decision to contact your doctor for a letter is at parental discretion.

Please tick this box if you are going to provide a doctor's letter

MY CHILD HAS AN EIPEN FOR ALLERGIC REACTIONS :

YES / NO

Although regrettable, there are occasions when it may not be possible to accommodate persons with particular or extensive conditions or special needs on some visits or in some activities since their health and safety may be placed at unacceptable risk. In such cases the decision of the Headteacher is final.

Form OA1/2017