**Form SOE3a: Parental consent for local off-site activities**

**(Annual consent form)**

**Dear Parent or Guardian,**

This is a consent form to cover local off-site trips and visits that your child may be undertaking during the school year, some of which may extend beyond the school day. A separate consent form will be sent out for any residential or overseas visits and for adventurous activities (as defined by the local authority). Details of each visit will be sent to you in advance.

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| **School, college or establishment**  **Ladysmith Junior School** |

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| **Outline of planned visits**  Outlined in each year group’s learning letter or details will be sent separately in advance. |

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| **Name of child Date of birth Class\_\_\_\_\_\_** |

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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?) |

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| **Has your child had any relevant recent illness?** |

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| **Does your child have any specific dietary requirements?** |

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| **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 numbers:**

**Home: Work:**

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| **Name of family doctor** |

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| **Approximate date of last tetanus injection:** |