

Student Name

CONSENT FORM FOR LOCAL OFF-SITE VISITS AND ACTIVITIES

As part of the school year, your son or daughter may go on various local activities. These may include visits to local businesses, environmental trips and outside art lessons. This consent form will be valid for the time that your son or daughter attends Fitzharrys School.

ease s	ign and date	the form below if you are happy for your child:
а		art in school / establishment visits and other off-site activities (including , sporting activities, local and environmental activities).
b	. To be giver activity.	en first aid or urgent medical treatment during any establishment / setting vi
nders	tand that:	
1		formed of the dates and nature of the activities beforehand and will have the y to withdraw this general consent should I wish to do so.
2		notice will be given if the activity extends beyond the school day so that e arrangements can be made.
3		ermission will be requested for extended journeys, residential visits, us activities and activities for which a charge will be made.
4		ensure the school is kept informed of any medical condition / disability as a arise. (Please complete the information below)
		mation - please list the following: medical condition(s) my child suffers from:
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M 	ledication my	y child should take during off-site visits: (eg inhalers for asthma)
_		
_		
S	igned (Parer	nt/Guardian)
Α	ddress:	

Mob: _____