



Easington Church of England Primary School

May we give them the roots to grow and the wings to fly.



Consent form for school trips and other off-site activities

Childs Name

Please sign and date the form below if you are happy for your child:

- a) To take part in school trips and other activities that take place off school premises; and
- b) To be given first aid or urgent medical treatment during any school trip or activity.

Please note the following important information before signing this form:

- The trips and activities covered by this consent include;
 - all visits (including residential trips) which take place during the holidays or a weekend
 - adventure activities at any time
 - off-site sporting fixtures outside the school day,
- The school will send you information about each trip or activity before it takes place.
- You can, if you wish, tell the school that you do not want your child to take part in any particular school trip or activity.

Written parental consent will not be requested from you for the majority of off-site activities offered by the school – for example, year-group visits to local amenities – as such activities are part of the school’s curriculum and usually take place during the normal school day.

This consent will apply for the duration of my son/daughters enrolment at the above school or until withdrawn in writing.

Please complete the medical information section below (if applicable) and sign and date this form if you agree to the above.

Medical information

Details of any medical condition that my child,suffers from and any medication my child should take during off-site visits:

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Signature of parent / guardian. Please sign this form if you agree with all the above.			
Name		Relationship to young person	
Signature		Date	
Emergency contact numbers –			