

**PLEASE complete these slips and return them to school**

Name of Child \_\_\_\_\_

Class/Year Group \_\_\_\_\_

**Educational Visits**

To save time when 'school trips' are being organised, we ask you to **sign and return this form** giving your permission for your child to take part in local educational visits off the school premises.

You will be notified by letter when trips are planned. If you do not want your child to take part in a trip, please let school know in writing.

**I give my permission for my child to go on any school activities – off school premises - that may take place this school year.  
I will notify the school in writing, if I do not want my child/children to take part.**

Signed \_\_\_\_\_ Parent/Guardian/Carer

**Permission to use photographs**



From time to time we submit articles and photos to local websites, newspapers, publications and use them on our own website, Twitter or Facebook page. Some parents may not want photographs of their children to appear in the local press/media/social media.

At no time will a child's full name be linked with a photograph of them on our school website, other local websites e.g 'Aboutmyarea', 'Keep it Local' Magazine, in our own 'Hello' magazine, leaflets, banners or prospectus.

I **DO NOT** want images of my children to be used to promote the school or celebrate school events in local press, websites etc **Please Tick** \_\_\_\_\_

I **DO** want images of my children to be used to promote the school or celebrate school events in local press, websites etc **Please Tick** \_\_\_\_\_

Signed \_\_\_\_\_ Parent/Guardian/Carer

**Medical Information**

**\*\*\*PLEASE COMPLETE THIS SECTION – Even if you have done so in previous years – Thank you\*\*\***

If your child has any medical conditions or allergies we should be aware of, please complete this page and return it to school.

**Medical condition**

\_\_\_\_\_  
\_\_\_\_\_

Is your child asthmatic? YES NO

Signs and symptoms of any medical conditions – what would staff see?

\_\_\_\_\_  
\_\_\_\_\_

What should staff do?

\_\_\_\_\_  
\_\_\_\_\_

Who should staff contact?

\_\_\_\_\_  
\_\_\_\_\_

**PLEASE list here any foods, sweets, drinks, medicines etc that your child/children is/are allergic to:**

\_\_\_\_\_  
\_\_\_\_\_

**DO WE HAVE YOUR UP-TO-DATE CONTACT DETAILS?**

If you have changed your address, land-line, work number or mobile phone number, please return this sheet, so that our records are up to date

Child's Name

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Your Name

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Home Address

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Home telephone number

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Mobile telephone number

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e-mail address

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2nd Contact (usually a partner or relative) - Name and telephone number

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**Please remember to inform us if your contact details change during the school year**



**Parents and Friends Association (PFA)**

Our PFA would welcome your support at school events and, if you have time, perhaps you could help organise an event or run a stall.

The money raised by the PFA supports school activities e.g. *theatre visits, musicians visiting school, supporting school clubs...* We would be very grateful of your help.

If you are willing to help please let us know by indicating below.

I am willing to help at events \_\_\_\_\_

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Any other information you feel your child's teacher should be aware of:

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