

Appendix 3



Dear Parent(s)/Carer(s)

Annual Consent/Indemnity Form for School Trips and Activities

In an attempt to reduce the burden of bureaucracy for parents, carers and schools the Trust is introducing a new annual consent form to replace the multiple forms needed currently for school visits and off-site activities. This information will be requested at the beginning of every academic year so that our records are kept up to date. In order to do this we request that you complete and return the attached form as soon as possible. If at any time during the school year you realise that this detail needs amending, particularly concerning medical or contact arrangements, please contact the school office via email admin@gainfordcofeprimary.co.uk or via telephone 01325 730274.

Please note the following important information before completing the form below:

- The trips and activities covered by the consent form include:-
 - Off-site sporting activities during and outside the college day.
 - Any visit within the UK that is not residential.
 - Any visit within the UK that is not deemed to involve adventurous activities.
 - Music/drama activities outside the college day.
- The school will still send you information about each trip or activity before it takes place.
- You can, if you wish, tell the school/college that you do not want your child to take part in any particular trip or activity.

Please complete and return the attached form if:

- You are happy for your child to take part in college trips and other activities that take place off the school premises but within the UK and do not involve either residential or hazardous activities.
- You are happy for your child to be given first aid or urgent medical or surgical treatment (including anaesthetic) as considered necessary by the medical authorities present as a result of an emergency, during any of the above college trips or activities.

Whilst we are trying to reduce the volume of paperwork going out to parents involving trips, if your child is involved in a trip or activity that is residential, involves hazardous activities or travel abroad then you will be asked to provide more detailed information relative to the individual trip.

Yours sincerely

Mrs K Whitaker

Head Teacher

Annual Consent/Indemnity Form for School Trips and Activities

Name of student:.....

Form:.....

Medical Information

Please provide details of any medical condition your child has, including regular medication needs, e.g. epilepsy/asthma/inhaler, diabetic/insulin/migraines etc. Please also provide the name, address and telephone number of your GP/Medical Centre.

Medical conditions

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Medication required (inc. dosage and frequency)

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Allergies (including food/medication).....

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Dietary requirements.....

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Does your son/daughter suffer from travel sickness?

If so please detail any medication taken?

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Name, address and telephone number of G.P./Medical Centre

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I give full permission for members of school staff to authorise emergency medical treatment in an emergency for my child and also to administer minor first aid if needed.

*Signed(Parent/Carer) Date:.....

Annual Consent / Indemnity Form

I agree that:

1. I consent to my child participating in college trips and other activities that take place off the school premises, within the UK and do not involve either residential or hazardous activities. I also agree to his/her participation in any or all of the activities involved.
2. I acknowledge the need for obedience and responsible behaviour on his/her part.
3. It is my responsibility to inform the School of any changes to the details on this form.
4. I can inform the School if I do not want my child to take part in any particular college trip or activity.
5. I will inform the School if I have any concerns regarding any medical complaint or treatment needed which may affect my child's participation in future trips.

With reference to insurance cover my son/daughter will be covered for personal accident and loss, damage and theft of personal belongings through the school journey insurance (or RPA cover) taken out by the School¹.

Please supply contact telephone numbers where parents/carers may be reached in the event of an emergency.

Name/relationship	Home	Work	Mobile

Please sign to acknowledge your agreement and consent. If you have any reservations or queries in connection with any educational/recreational visit please contact the School.

I hereby sign the Annual Consent/Indemnity Form to give permission for my child to take part in visits and agree to the conditions in this agreement.

*Signed(Parent/Carer) Date:.....

Please return the completed form to (*insert where*)

¹subject to limits and policy excess