



Castlebridge School
Annual Consent for Off-site Activities

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.

Visits or activities may include such trips as;

Outdoor education, such as to the local climbing centre, golf, etc. Inter-school football.

Visits to local greenspaces/parks etc.

Other offsite activities – we will discuss with you in advance.

Name of child:

Date of birth:

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?)

Has your child had any relevant recent illness?

Does your child have any specific dietary requirements?

Do you have any additional comments?

Swimming ability (for water-based activities) –

Is your child able to swim 50 metres? YES / NO

Is your child water confident for the proposed activity? YES / NO

Name of family doctor:
Approximate date of last tetanus injection:

1. I would like my child to take part in this visit or activity and having read the information provided agree to him/her taking part in the activities described.
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.

Name of Parent/Guardian:
Signature:
Date:
Address:
Email:
Phone 1: Phone 2: