

St Mary's Catholic Primary School

Parent Consent Form

	e sign and date the form below if you are happy for your in class
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.
Pleas	e note the following important information before signing this form:
•	The trips and activities covered by this consent include; o all visits (including residential trips) o adventure activities at any time o off-site sporting fixtures outside the school day, o all off-site activities for nursery schools.
•	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.
activit as suc	n parental consent will not be requested from you for the majority of off-site ies offered by the school – for example, year-group visits to local amenities – ch activities are part of the school's curriculum and usually take place during ormal school day.
	e complete the medical information section below (if applicable) and sign and his form if you agree to the above.
MEDI	CAL INFORMATION
	s of any medical condition that my child suffers and any medication my child should take during off-site visits:
Signe	d