



Batheaston Primary School

Event: YEAR 3 and 4 'Move a Mile' Festival

Transport: Coach

Date of Event: Tuesday 14th November

Year group(s) involved: 3 and 4

Lead Adult: Alison Smith and Sarah Morrison

Details of event:

From (Time): **12:55 p.m.** To (Time): **3 p.m.**

I agree to _____ (name of child)
travelling by coach to the sports event and have read the attached letter outlining the event details.

I acknowledge the need for him/ her to behave responsibly.

Medical information about your child

- i. Any conditions requiring medical treatment, including medication? YES/ NO
If YES, please give brief details:

- ii. Is your son/ daughter allergic to any medication? YES/NO
If YES, please specify:

I will inform the school office as soon as possible of any changes in the medical or other circumstances between now and the commencement of the journey.

PTO

Declaration

I agree to my son/ daughter _____ (name of child) receiving medication as instructed and any emergency dental, medical or surgical treatment including anaesthetic or bloody transfusion as considered necessary by the medical authorities present. I understand the extent and limitations of the insurance cover provided (details available in the school office).

Contact telephone numbers at this date/time:

Name: _____ Number: _____

Alternative contact telephone numbers at this date/time:

Name: _____ Relationship: _____

Number: _____

Name of family doctor: _____ **Telephone number:** _____

Address: _____

Signed: _____

Date: _____

Full name (capitals): _____

THIS FORM OR A COPY WILL BE TAKEN BY THE GROUP LEADER TO THE EVENT. A COPY WILL BE RETAINED BY THE SCHOOL OFFICE.

Thank you.