



# TWERTON INFANT SCHOOL & NURSERY

[www.twerton-infant-school.co.uk](http://www.twerton-infant-school.co.uk)

Dear Parent/Carer,

Tuesday 18<sup>th</sup> September 2018

## RE: School trips 2018-19

Each year, the school arranges a number of school trips and visits for its pupils – they are designed to enhance your child's learning experience and teach them important skills. I am writing to seek your permission for your child to take part in the school trips and visits throughout the school year.

By signing this letter, you are consenting to your child participating in:

- All visits which take place during the academic year
- Off-site sporting activities during term time and outside of the school day
- All off-site activities, including walks and visits to the local area.

If you are happy to consent we will not seek secondary consent. We will, however, send you information well in advance of each trip that will include, for example, any costs, the itinerary and the details of members of staff accompanying children on the trip.

Please don't worry if this seems like a big commitment now – we appreciate that circumstances change, so, if you would like to withdraw your child from any trip at a later date, you can do so. If you wish to withdraw your child, we ask you do this in writing to your child's teacher or to the School Office no later than one week prior to the trip.

If you are happy to consent to all of the school trips, please complete the permission and medical form on the reverse of this letter and return it to the school office no later than Monday 24<sup>th</sup> September 2018.

Thank you in advance for your cooperation with this matter.

Yours sincerely,

George Samios  
Headteacher



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## Medical form

Does your child suffer from any allergy, illness or disability?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes please provide further details, including any prescribed medication, times and doses.		
Do you consent to your child receiving first aid during the school trips?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you consent to your child receiving urgent care during the school trips?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

I can confirm that the information I have provided within this form is accurate. I am also happy for my child to receive first aid or urgent medical care whilst on a school trip or activity.

(1) Name of parent	
Emergency contact number (1)	
(2) Name of contact	
Emergency contact number (2)	

## Permission form

By signing this form, I agree to the terms outlined in the letter that enables my child to participate in all of the listed school trips attached to this form.

Name of pupil	
Year group	
Name of parent	
Signed	
Date	