

Dear Parents,

As I am sure you are aware, regular opportunities for outdoor and offsite learning are encouraged at Fern Hill and are planned into the curriculum for each year group in the school.

Currently, each time we take children out of school, we have to ask you to consent. To make the organisation a little less complicated, I would be grateful if you would sign the accompanying overall consent form to cover any local visits for this academic year. Local means any trip where the children travel by walking for a maximum time of 45 minutes or by minibus within the Borough of Kingston, where no monetary contribution is required. Such visits would of course have the requisite regulation staff supervision and cover.

We will continue to inform you if your child was going to be out and advise you of anything they may require for the trip, such as a packed lunch, but with a global consent form there would be no need for you to sign a permission slip each time.

There is also a medical information and contact details form attached to this letter, to ensure we have up to date information, which is particularly important when taking the children off the school premises.

On those occasions when visits involve any kind of cost and voluntary contribution, or where we are traveling over a greater distance, you will receive a letter with details and consent form as usual. You will in some cases also be asked to provide contact information for that particular day.

We will send out this letter with the two attached forms at the beginning of each academic year, to try and improve trip and event organisation and cut down on the number of reply slips that parents are required to return to school.

Yours sincerely,

Rachel Kluczynski  
Headteacher

## Generic Consent for Local Trips

I/we agree to

Name: \_\_\_\_\_

Class: \_\_\_\_\_ Year group: \_\_\_\_\_

Being taken on local trips, walking no further than 45 minutes, or traveling by minibus within the Borough of Kingston, when no monetary contribution is required.

I will be informed by the school when these trips are taking place, but understand that I will not need to fill in an additional consent form.

I will contact the school at least 2 days before the trip if I am unhappy for my child to attend, outlining my reasons.

Signature: \_\_\_\_\_

Name of parent/ guardian: \_\_\_\_\_

Date: \_\_\_\_\_

## Confidential Medical and Emergency Contact Details

**Name of Child:** \_\_\_\_\_ **Class:** \_\_\_\_\_

### Contact Details (in priority order left to right)

Mr/Mrs/Miss/Ms			
Relationship to child:			
Occupation			
Daytime Address			
Daytime phone no: Mobile:			
e-mail address:			

### Medical Information

Has your child had any of the following? (please tick)

Asthma or bronchitis		Allergies to any known drugs or medication	
Heart condition		Any other allergies e.g. food/ insects bites.	
Fits, fainting or blackouts		Other illness of disability	
Diabetes			

If you ticked any of the above, please provide details here:

In the event of accident or illness, I consent to my child being taken to hospital and/or receive any emergency treatment necessary.

I will inform the school immediately if any of the information I have provided changes.

Signed \_\_\_\_\_ Date: \_\_\_\_\_