



Local Visits Permission Form

Dear Parent,

There are a number of times during the school year when we at Brookside School would like to take the children in to the village to support their class based activities. Visits may occur at any time during the year. Occasionally these opportunities are spontaneous or directed by the weather. In order to help us to do this, it would be of great value if we already have your consent for such local visits.

Visits may include journeys to the brook, local churches, Harry Carlton School, the war memorial, Meadow Park, East Leake Leisure Centre and so on.

Therefore, could you please complete the following consent form and return to the school office.

During the year, if there are any changes to your child's medical or contact details then please inform us as soon as possible.

Thank you in anticipation.

P. Lowther (Deputy Head Teacher)

I give consent for my child _____ to be taken out of school and visit the local area of East Leake for educational visits.

Signed: Parent/ Guardian _____ . Date: _____.

1st emergency contact:

Home: _____ Work: _____ Mob: _____

If I am not available, please try: _____

2nd emergency contact:

Name: _____ Home: _____ Mob: _____

Name, address and telephone number of local doctor:

Any details of medication? (Type of medication, dosage, times of day, method of administration): _____
