

# TRIP AND ACTIVITY CONSENT FORM

I **do** / **do not** (please delete as appropriate) give permission for my child:

\_\_\_\_\_ (child's full name)

To attend the following trip / activity: \_\_\_\_\_

Signed:			Date:
Name (please print)			
Relationship to child			
Address			
Contact numbers:	Home:		
	Work:		
	Mobile:		
Email address:			

**Further emergency contact details, if different from above:**

Name (please print)			
Relationship to child			
Address			
Contact numbers:	Home:		
	Work:		
	Mobile:		
Email address:			

**Please use the box below to describe any special care needs, dietary requirements, allergies or medical conditions:**

**Please return this form to:**

<b>Name (please print)</b>	
<b>Address or instructions for returning this form</b>	