

PUPIL NAME

1. SWIMMING PERMISSION

I give permission for my child to take part in the swimming lessons organised by The Forest School. I understand my child will be transported to the pool by bus.

I understand that these lessons will be under the supervision of a qualified life-saver and a member of staff.
YES I GIVE PERMISSION []
NO I DO NOT GIVE PERMISSION []

2. GARDENING PERMISSION

I give permission for the above named pupil to take part in gardening activities. This may involve visiting the school allotment using the school minibus.

YES I GIVE PERMISSION []
NO I DO NOT GIVE PERMISSION []

3. WARM WEATHER AND SUN CREAM

I give permission for the use of Sun Cream on my child

YES I GIVE PERMISSION []
NO I DO NOT GIVE PERMISSION []

4. WOODLAND ADVENTURE

I give permission for the above named pupil to be photographed and feature in a newsletter about Woodland Adventure activities. One newsletter per class to be sent home

YES I GIVE PERMISSION []
NO I DO NOT GIVE PERMISSION []

5. OVER THE COUNTER MEDICATION

I give consent for school to administer 'over the counter' medication for short term use only (provided by parent/carer) and will complete a Form Med 1 (to be sent in with medication).

YES I GIVE PERMISSION []
NO I DO NOT GIVE PERMISSION []

Signed.....(Parent/Carer)

Date.....