

**GHYLL HEAD OUTDOOR EDUCATION CENTRE, WINDERMERE,
CUMBRIA , LA23 3LN**

PARENTAL CONSENT FORM (for those under 18)

Students Name..... Male
..... Female Date of birth.....

School/Organisation.....

1. Visit to Ghyll Head Outdoor Education Centre

Course dates fromto.....

I agree to my son/daughter
.....(name)
taking part in the above-mentioned visit and, having read the information sheet, agree to his/her participation in any or all of the activities described. I acknowledge the need for obedience and responsible behaviour on his/her part.

2. Medical Information

- a. Does your son/daughter suffer from any conditions requiring medical treatment, including medication? YES/NO If yes, please specify.....
.....
.....
- b. To the best of your knowledge, has your son/daughter been in contact with or suffered from any contagious or infectious diseases in the last 4 weeks? YES/NO If yes, please give brief details.....
.....
- c. Is your son/daughter allergic to any medications? YES/NO If yes please specify
.....
- d. Has your son/daughter received a tetanus injection in the last 5 years? YES/NO
- e. Please outline any special dietary requirements of your child
.....
.....
- f. If necessary, in the case of pain/flu relief, may your child be given paracetamol? YES/NO

3. Declaration

I undertake to inform the organiser/Head, as soon as possible of any change in the medical circumstances between the date signed and the commencement of the visit.

I agree to my son/daughter receiving any emergency dental/medical treatment or surgery, including anaesthetic or transfusions, as considered necessary by the medical authorities present. I understand the extent and limitations of the insurance cover provided.

I may be contacted by telephoning the following numbers:

Home.....Work.....

My home address is :
.....
.....

If not available at the above, please contact:

Name.....Telephone number.....
Address.....
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Name, address and telephone number of family doctor:.....
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4. ICT Consent

During the visit to Ghyll Head, pupils may have an opportunity to use the computer suite and possibly use the internet. All access will be supervised and rules for usage will be as in school.

Digital cameras are used to record activities at the Centre and images of children or copies of their creative work may be used on the Centre website or publicity material. All representations will be of a positive nature and will only be used within the boundaries of the School Internet Site, the Centre Website and Centre publicity materials.

Parental consent to the use of electronic mail and the internet YES/NO

Parental consent for use of photographic images or creative work YES/NO

Signed.....Date.....

(Parent/Guardian)

Full Name(capital letters)