

# PARENTAL CONSENT – SCHOOL ACTIVITIES



January 2018

**Pupil Name**

**Date of birth**

Your child will have the opportunity to access a range of different activities that will take place on and off site. Some of these take place as part of the regular school day, some as part of residence and extended day and others may be one-off trips or visits. Examples of activities are given below. Some of the more adventurous activities may be physically demanding and may have hazards associated with them. Holly House take every care and precaution in planning and carrying out such activities to ensure the safety of all participants. Pupils will be made aware of risks and hazards and staff will follow all risk management guidelines to make things as safe as possible. We feel that 'appropriate risk taking' is an important part of growing up and if managed in a structured and safe way, pupils will enjoy and benefit from adventurous activities. Occasionally accidents may happen, but if pupils listen to staff and behave appropriately then these will be extremely rare events. Pupils will be assessed for suitability for an activity on an individual basis depending on their age, size, physical ability, behaviour and their individual Risk Assessment.

## ACTIVITIES

Park visits including Playgrounds and golf  
Gardens and gardening activities  
Local towns and villages  
Shops and shopping centres  
Libraries  
Places of worship and historic buildings  
Theatres  
Concert halls  
Cinemas  
Circus  
Museums and Galleries  
Problem solving and Team building including  
Laser-quest and paintballing  
Snow tubing/tobogganing  
Caving  
Ice skating/roller skating  
Abseiling  
Rock Climbing  
Indoor/artificial climbing walls  
Gorge walking  
Camping  
Hill walking  
Orienteering  
Worm holing  
Field Work eg. Pond Dipping, nature walks  
Zoo/Farm/factory visits

Activities at other schools  
Sporting fixtures against other schools  
Sports activities off-site eg. Bowls, Football  
Spectating at sporting events  
Walking – non-remote eg. Country paths  
Sports and Leisure Centres (excluding swimming)  
Places of interest – Magna, National Space Centre, Castles  
Public Transport  
Theme Parks and Adventure Playgrounds  
Theme Park visits – boating lake  
Show Caves  
Life Skills Excursions  
Beach Visits  
Cycling  
Mountain biking  
Open canoeing/kayaking  
Raft building  
Sailing  
Swimming  
Fishing  
High and low rope courses  
Forest schools  
Power Kiting  
BBQ/outdoor cooking  
Archery

**Is your child able to swim? (Confident over 25 metres?)**

**YES/NO**

I give my consent for (pupil name) ..... to take part in activities at Holly House in accordance with all the details outlined in this consent form. This will consent expire on 31<sup>st</sup> January 2019

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

Name .....

Address .....

.....  
Email address (if you have one?)

## PARENTAL MEDICAL CONSENT

When your child started at Holly House you filled in an Information Form that included Medical Details. You also filled in a Medical Consent Form relating to prescribed medication. This form relates more specifically to School Activities, both on and off site and provides us with important information in the event of an emergency. It is crucial that school can always get in touch with someone in an emergency.

1<sup>st</sup> Emergency Contact - relationship to child .....

Name Number

2<sup>nd</sup> Emergency Contact - relationship to child .....

Name Number

Family GP/doctor

Name Number

**Does your child have any medical or health conditions or take any prescribed medication that we should be aware of that might affect their ability to take part in any activities?**

**Medical/Health conditions or specific allergies** (eg Asthma, Epilepsy)

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Prescribed Medication**

- \_\_\_\_\_
- \_\_\_\_\_

Holly House will keep you informed of all activities that your child will be participating in. This will usually be done through letter or text message. The final decision on involvement in any activity will be decided on or before the day based on an individual behaviour risk assessment and their suitability for participation in the activity.

**This consent will remain active for the whole of this year up to the end of January 2019.**

**Please inform Holly House of any changes of circumstance including emergency contact number during the year as soon as possible**

I agree to inform school immediately if my child's medical conditions or prescribed medication change.  
(by email to [info@hollyhouse.derbyshire.sch.uk](mailto:info@hollyhouse.derbyshire.sch.uk) or phone 01246 450530 or letter to the school office)

I agree for my child to receive any medical/dental treatment that is considered necessary by the medical authorities present in the event of an emergency. (School will make every effort to contact you in this event)

I am aware that I can withdraw my consent at any time during the year by informing the Head Teacher, in writing including the date when consent is withdrawn.

Pupil Name .....

Signed .....

Date .....