

Establishment: The Hendreds Primary School PARENTAL/GUARDIAN CONSENT FORM

Participant's name :	
Proposed visit and activity(ies): Lulworth (2021	Cove and Osmington Bay, 11-13 June
I have read the proposed itinerary, activitie	s, financial and general information for
this visit and agree to my son/daughter nar	ned above attending and participating fully
in the proposed activities.	
I agree to inform the Head of Establishmer	nt of any change in my son's/daughter's
medical or other condition(s) or any other r	elevant circumstances before the start of
the visit.	
I agree to my son/daughter receiving any a	
including anaesthetic and/or blood transfusion, as may be considered necessary by	
the medical authorities in attendance shou	
I understand the extent and limitations of the insurance cover provided by PGL, under written by Fogg Travel Insurance. (Parent guide: https://www.pgl.co.uk/engb/school-trips/resources/parent-guide/peace-of-mind).	
(Parent/Guardian)	Date
Name (Please print)	
I can be contacted at :	
Home Address :	Work Address :
Post code:	Post code:
Telephone numbers:	
Home:	Work:
Mobile:	Mobile:
Email:	Email:
If not available please contact:	
Although remattable there are a sections	ukan it manungat kanga situla ta
Although regrettable, there are occasions v	· · · · · · · · · · · · · · · · · · ·
accommodate persons with particular or extensive conditions or special needs on	

In such cases the decision of the Head of Establishment is final.

unacceptable risk.

some visits or in some activities since their health and safety may be placed at