



# LINGFIELD PRIMARY SCHOOL

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Partners in Learning  
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Dear Parent

As you will be aware, we often take children on local visits\* in connection with work in school. Each time we do this we have to ask your consent. To make organisation a little less complicated, I would be grateful if you would sign the accompanying overall consent form to cover any local visits.

Such visits would normally be on foot, but might be by staff or parent car or free coach. There would always be the requisite regulation staff and cover. We would still inform you if your child was going to be out, but with a global consent form there would be no need for you to reply each time.

On those occasions when visits involve any kind of cost and voluntary contribution, you will receive a letter with details and consent form as usual.

Yours sincerely

Ron Gandolfo

Headteacher

\* "Local" normally means just the village of Lingfield, but at times we also visit other schools etc. For the purpose of this letter "local" means the area around Lingfield bordered by the M25 to the north; M23 to the west; East Grinstead to the south and Edenbridge to the east

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## LINGFIELD PRIMARY SCHOOL PARENTS' CONSENT FORM - LOCAL VISITS

Child's Name \_\_\_\_\_ Class \_\_\_\_\_

I wish my child to be involved in local visits and I understand that I will be sent details of all such visits but unless there are associated costs, I will not be expected to give my consent for each individual visit.

I further understand that a local visit would not include a residential stay or activities, such as rock climbing, which could be described as potentially hazardous. In any such cases the school will seek my consent on each and every occasion.

I consent to any emergency medical treatment necessary during the course of a visit.

I consent/do not consent \*to my son/daughter being given a mild painkiller (paracetamol) if considered necessary by the party leader.

My child has                      no illness, allergy or physical disability\*  
the following illness, allergy or disability\* (Delete as applicable)

Signed \_\_\_\_\_

