**BEDFORD HIGH SCHOOL CONSENT FORM**

**CATEGORY A & B EDUCATIONAL VISIT (LOCAL OR OUTSIDE THE BOROUGH)**

**FORM TO BE RETURNED TO FORM TEACHER:**

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| **Name of Pupil/Student: DOB: Form:**  **Trip Title and Details? Year 10 Careers Education, Information, Advice & Guidance – consent for all activities in the letter dated 30th March 2022.** |

To the Headteacher/Manager/Project Leader

I agree that my child can participate in the educational activities as indicated in the letter dated 30th March 2022 and I understand that appropriate risk assessments will be carried out for all events and activities.

**Recent Medical or non-Medical Conditions, such as Asthma, Diabetes, Travel Sickness, Dietary Requirements**

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**Consent for transport in Parent/Volunteers vehicles**

To the Headteacher/Manager/Project Leader

I confirm that I have no objection to my child being transported to or from the offsite venues by named volunteers who have had clearance by the Head/Managers and my child can make their own way home following their return to School. I understand that if coach hire is required, the school will use a reputable coach hire company.

**Consent for Emergency Medical Treatment**

I confirm that I am willing for the school representative to sign on my behalf any forms of consent required by the hospital authorities in the event that my son/daughter requires emergency medical treatment, provided the delay required to obtain my own signature might be considered by the doctor/surgeon to endanger my son’s/daughter’s health or safety.

**Consent for Photographs**

Images taken at this event may be included in printed and online publicity for Bedford High School. Images and video may be included (but is not limited to), their use in printed and online publicity, social media and press releases.

If you DO NOT want images to be taken AT THESE EVENTS then please tick the box

Signed: ……………………………………………………………………

Parent/Guardian (please give full name in capital letters): …………………………………………………………………….

It is important that we can contact a member of the family during the duration of the trip, please provide two contact details below.

Home: Work: Mobile:

If I am not available as above, please contact:

Name:

Contact telephone No’s:

Home: Work: Mobile: