



Harrietsham Church of England Primary School

Headteacher: Mrs Jackie Chambers
Deputy: Mr Jon Gambell
Chair of Governors: Mrs Rebecca Emson



Nurtured We Flourish

☎ 01622 859261

Email: office@harrietsham.kent.sch.uk

Website: www.harrietsham.kent.sch.uk

Educational Visits

Dear Parents,

At Harrietsham CE Primary School, we view educational visits as opportunities to enrich the curriculum we provide for your child and foster a love of learning. In line with KCC guidelines, we do not seek permission from parents to take children off site, as long as it is 'within the school day' and 'non-adventurous'.

Therefore, individual written consent will not be requested from you for the majority of off-site activities, as such, activities are part of the school curriculum and usually take place during the normal school day.

However, WE WILL ALWAYS ensure that all parents are informed of any planned visit well in advance.

Please note the following important information before signing this form:

The type of trips and activities covered by this consent include, but are not limited to:

- Visits to local secondary schools (e.g. to participate in special workshops)
- Visits to local amenities (e.g. church, library, park)
- Non-adventurous visits (e.g. visits to the Museum of Kent Life)
- Visits to other schools to participate in inter-school competitions and joint activities

You can, if you wish, tell the school that you do not want your child to take part in any particular school trip or activity when we send out the advance notification. Signing this form does not remove this right.

We take all medical information and permission forms on every visit as part of our risk assessment process. Therefore, please sign and return the attached form which will be kept on file so that teachers can take it off site on a visit. The form is completed annually at the start of the academic year to ensure that we have the most up to date information recorded for the children.

Yours Sincerely,

Mrs J Chambers
Headteacher





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EDUCATIONAL VISITS – HARRIETSHAM PRIMARY SCHOOL

Child's Full Name (printed)..... Date of Birth.....

Please circle your response

I understand that

the school do not need permission for local visits within the school day

the school will notify me in advance of each visit

I have the right to withdraw my child from a visit at any time

YES / NO

- My child suffers from asthma

YES / NO

My child requires an inhaler which must be carried at all times

YES / NO

If so, I will ensure this is provided on the day of visit

- My child has allergies

YES / NO

My child requires an epi-pen which must be carried at all times

YES / NO

If so, I will ensure this is provided on the day of visit

Please give details below (including other medication requirements such as Piriton)

.....
.....

- Please give details of any other medical conditions that we should be aware of when going off site.

.....
.....

In the case of serious injury or accident, I understand that decisions regarding emergency medical treatment, including anaesthetic, dental, surgery and blood transfusions will be made by NHS personnel until my arrival.

I give permission for my child to receive a blood transfusion if necessary

YES / NO

I will ensure that I update the school in writing with any medical information when necessary.

Parent Signature..... Date

Parent Name (PRINT)

