



Christmas Disco Consent Form - Friday 14th December 2018

Please fill in this consent form if your child /ren will be attending the Disco.

Please note that when the PTA are running events we are responsible for your children. Therefore, please fill in this form to ensure we have your consent. A member of the PTA will hold these records securely and they will only be used for the purposes of the Disco.

We have trained First Aiders Alison Locke and Laura Rosser and insurances in place to safeguard your children. However, it does mean that we need to know any allergies or specific medical requirements for children attending the Disco.

If your child requires medication, you will need to sign this over to one of the PTA First-Aiders at the event (Alison Locke or). The PTA cannot access school records or medication held within school.

Our key priority is the safe wellbeing of the children, so please ensure we have the appropriate information and medication in order to do this. Your cooperation is appreciated.

I give permission for my child / ren, as named below, to attend the Easter Disco on the above date. I have listed any required medication for my child / ren and and happy for the event First Aiders to administer this if required.

Parent / Carers name:

Emergency contact number:

Signature:

Child's name: Year group:

Child's name: Year group:

Child's name: Year group:

Allergies or Medical requirements:

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