**Consent Form for Local Visits and Plaster Application**

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| Name of Pupil |  |

Dear Parent/Carer,

In addition to the parental consents required for Recording and Use of Images and for Data Sharing, consent is also required for the following:

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| --- | --- |
| I confirm my consent to the school to apply plasters to my child in accordance with our Health & Safety Policy | YES / NO |
| I give permission for my child to be included in any visits within the local area, including short walks and places of interest. | YES / NO |

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| --- | --- |
| **Signature** |  |
| **Print Name** |  |
| **Relationship to Child** |  |
| **Address** |  |
| **Telephone Number** |  |
| **Date** |  |