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**Grampound with Creed C of E School**

Fore Street, Grampound, TR2 4SB

grampoundwithcreed.secretary@celticcross.education

01726 882644 [www.grampoundwithcreedschool.co.uk](http://www.grampoundwithcreedschool.co.uk)

6th November 2019

Dear parents,

**Pedrevan Trip to Clifton Villa Vets**

On **Thursday 21st November**, Pedrevan children will be going on a trip to Clifton Villa Vets, Truro to support our current topic “Why do we have bones?”. We plan to travel to the practice by minibus leaving at 1.15. We hope to return to school in time for normal pick up but will send out a text if we are running slightly late. Children will need to wear school uniform.

**There will be a small charge of £1.50 to cover the cost of travel. Although this is a voluntary donation, we will not necessarily be able to run the trip without it and we thank you for your support with this.**

Please could you complete the permission slip below and return it to school.

Kind Regards,

The EYFS team

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**GRAMPOUND WITH CREED CHURCH OF ENGLAND SCHOOL –**

**Parental Consent Form**

This form has been produced for parents/guardians of children at Grampound with Creed Church of England School to complete with regard to visits and journeys. Please note that in signing this form your rights are not affected in any way.

Visit/Activity **Clifton Villa Vets**

Date **Thursday 21st November 2019**

I wish my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to be allowed to take part in the above mentioned visit/activity and, having read the information provided, agree to him/her taking part in any of the activities described.

I consent to any emergency medical treatment required by my child during the course of the visit.

I confirm that my child does not suffer from any medical condition requiring regular treatment OR my child suffers from\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ requiring regular treatment (e.g. diabetes, asthma). If your child suffers from a particular complaint, please give details of the complaint and its treatment on the back or this form.

I consent to my child travelling by any form of public or contracted transport.

I consent to my child travelling in a car to be driven by a parent or teacher who is suitably insured.

Signature of Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Numbers: Home\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_