

CUMBRIA COUNTY COUNCIL CHILDRENS SERVICES

**PARENTAL CONSENT 2017/2018
REGULAR OUT OF SCHOOL ACTIVITIES/VISITS**

School: Beacon Hill Community School, Market Square, Aspatria, Cumbria, CA7 3EZ.

Pupil: _____ **Tutor Group:** _____

I hereby agree to my son/daughter participating in recognised activities off the site, but only if the visit is within the County or neighbouring area, for example, local environmental studies, swimming, joint sporting activities with other schools, etc.

I understand that:

- I will be informed of the dates and nature of the activities prior to them taking place and will consequently have an opportunity to revoke this general consent if, in a particular situation, I wish to do so.
- Such activities will not often extend beyond the school day, but that if, occasionally, they are likely to do so, adequate advance notice will be given so that I can decide whether or not to consent to this and, if so, make appropriate arrangements for his/her safe return home.
- My specific permission will be sought for any out-of-school activities beyond those outlined above and which could involve commitment to extended journeys or times, expense or hazards.
- All reasonable care will be taken of my child in respect of the activity/visit.
- My child will be under an obligation to obey all directions given and observe all rules and regulations governing the activity/visit and will be subject to normal school discipline during the activity/visit.
- Any medical condition or physical disabilities will be notified to the school now and as and when they arise.
- All pupils are covered by the County Council's third party liability insurance in respect of any claim arising from an incidence caused by a defect in the school premises or equipment attributable to negligence by the Council or one of their employees. **These arrangements do not provide personal accident cover.**

My son/daughter suffers from the following medical conditions which may need to be taken into account when he/she is participating in a regular off-site visit.

Signature of parent/guardian: _____

Date: _____