



RED HOUSE
SCHOOL

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27 April 2018

Dear Parent

EYFS Visit to Billingham Forum – Thursday 7 June 2018

Nursery and Reception children will be visiting Billingham Forum on Thursday 7 June to see 'What the Ladybird Heard'. This links in with Nursery's topic mini beasts and Reception's study of stories. The children will depart school at 1pm (School Mini Buses) and will return to school for 3pm.

The children should wear school uniform and they will need their outdoor coat.

Mr Barnbrook-McKay and Miss Dring will lead the visit and will be accompanied by other staff and parent volunteers. If you are able to volunteer, please complete the slip below and return to Mr Barnbrook-McKay via the school office. The visit is subject to the conditions set out in the Parent Contract and will be covered by the school's insurance policy. Staff will take a first aid kit with them and there are additional first aid facilities on site. If your child suffers from asthma or severe allergic reactions please ensure their inhaler/medication/epipen is with them. If they do not have them, they will be unable to go on the trip.

Please ensure that you have notified School of any changes to your contact numbers.

The cost of the trip will be £11 and will be added to your fee account.

Please complete the attached consent form and return to Mrs Green by Friday 11 May.

Yours sincerely

Mr I Barnbrook-McKay
EYFS Co-ordinator

EYFS Visit to Billingham Forum – Thursday 7 June

Name of pupil:.....

I would like to volunteer to help with the EYFS visit to Billingham Forum – Thursday 7 June

Name:.....Signed:.....

NB. We often have many volunteers and we endeavour to be as fair as possible when selecting adult helpers. Mr Barnbrook-McKay will contact you if we would like you to help.

Red House School

PARENTAL CONSENT FOR A SCHOOL VISIT

PLEASE COMPLETE BOTH SIDES

(To be distributed with any information sheet giving full details of the visit)

Name:.....Form:.....

Details of visits: EYFS to Billingham Forum: Thursday 7 June 2018

1. I agree to taking part in this visit and have read the information sheet.

I agree to my child participating in the activities described.

I acknowledge the need for my child to behave responsibly.

2. Medical information about your child:

(a) Any conditions requiring medical treatment, including medication? YES/NO

If YES, please give brief details:

.....

(b) Please outline any special dietary requirements of your child and the type of pain/flu relief medication your child may be given, if necessary:

.....

(c) Please give details of any other health/behavioural information which would be useful to the group leader:

.....

(e) Is your son/daughter allergic to any medication? YES/NO

If yes, please specify:

.....

(f) When did your son/daughter last have a tetanus injection:

.....

I will inform the Group Leader/Head Teacher as soon as possible of any changes in the medical or other circumstances between now and the commencement of the journey.

CONTINUED OVERLEAF

1 Declaration

I agree to my son/daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present. I understand the extent and limitations of the insurance cover provided.

I acknowledge £11 will be added to the next school fee bill.

Contact telephone numbers:

Work:Mobile:.....

Home:.....

Address:

.....

Alternative emergency contact:

Name: Tel No:

Name of Family Doctor:

Tel No:

Signed: Date:

Full Name:

(In capital letters please)

**THIS FORM, OR A COPY, MUST BE TAKEN BY THE GROUP LEADER ON THE VISIT.
A COPY SHOULD BE RETAINED BY THE SCHOOL CONTACT.**