

RED HOUSE
SCHOOL

36 The Green
Norton
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8 February 2019

Dear Parents

Nursery visit to Stockton Fire Station, Norton: Wednesday 20 March

Nursery children will be visiting Stockton Fire Station, Norton on Wednesday 20 March. The children will depart at 9.30am. The children will be walking to and from the station. The pupils will return to school in time for lunch.

The children will participate in some 'hands on' experiences based on our topic 'Superheroes: Real life heroes'. They will have the opportunity to tour the station and meet some of the fire fighters and view the equipment.

The children should wear their school uniform and outdoor coat. The children will wear either shoes or wellington boots depending upon the weather on the day.

The trip will be 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.

I will lead the visit and will be accompanied by other nursery staff and parent volunteers. If you are able to volunteer, please complete the slip below and return to Mrs Green.

Please also complete the attached consent form and return to Mrs Green by 15 February

There is no charge for this trip.

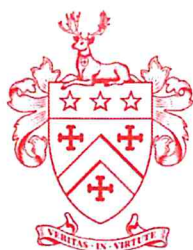
Yours sincerely

Mr I Barnbrook- McKay
EYFS co-ordinator

Nursery: Stockton Fire Station, Wednesday 20 March

I would like to volunteer to help with the Nursery visit to Stockton Fire Station, Norton on 20 March.

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



PARENTAL CONSENT FOR A SCHOOL VISIT

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

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

1 Details of visit: Nursery to Fire Station 20/03/19

I agree to taking part in this visit and have read the letter

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

3 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.

4 Contact telephone numbers

Work: Mobile:

Home:

Address:

.....

Alternative emergency contact:

Name: Tel No:

Name of Family Doctor:

Tel No:

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**