



**CONSENT FORM FOR DAY TRIPS and OUTINGS  
ORGANIZED BY FIZ HOLIDAY CLUB in 2017/2018 Academic Year**



You do not need to fill this Form if you have already completed one for October Half-Term, unless original information needs to be updated.

**Please complete the following information.** *One copy will be kept in a FIZ file and one given to a trip leader.*

**If the information should change before the outing/trip commences, please inform us immediately.**

Pupil's Name: \_\_\_\_\_ Form: \_\_\_\_\_

Does your child have any special dietary requirements? Yes/No If yes please give details below:

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Does your child have any on-going medical condition that the group leader should be aware of? Yes/No (if yes please give details below:

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Does your child have any known allergies? Yes/No If yes please give details below:

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Does your child suffer from locomotion or motion sickness? Yes/No (if yes please give details below:

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In the event of an accident, the leader of the party may consent on my behalf to the administration of an anaesthetic or any treatment as may be deemed necessary, if I cannot be contacted.

The School will not accept any liability for any loss or damage, howsoever caused, whether direct or indirect, financial, economic, consequential or otherwise and in particular, it will not accept responsibility for the acts or omission of third parties.

**Parent/Guardian Emergency contact numbers:**

Daytime: \_\_\_\_\_ Mobile: \_\_\_\_\_

Alternative Emergency Contact:

Name: \_\_\_\_\_

Daytime: \_\_\_\_\_ Mobile: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_