## **PERMISSION FORM – KINGS PARK RESIDENTIAL**

To be completed on behalf of the young person by a parent/carer and returned to school by Tuesday 16<sup>th</sup> April. If this is not possible, please e-mail to the school office (office@bliss.northants.sch.uk).

## THIS INFORMATION WILL BE HELD SECURELY AND IN THE STRICTEST CONFIDENCE. THIS INFORMATION WILL NOT BE HELD ON FILE AFTER THE VISIT.

	PERSONAL INFORMATION
Dates of visit:	Thursday 18 <sup>th</sup> April – Friday 19 <sup>th</sup> April 2024
Name of the young person attending:	
Date of birth of the young person:	
Address:	
Parent(s)/carer(s) name(s):	
Parent(s)/carer(s) contact number(s):	
	MEDICAL INFORMATION
Doctor:	
Doctor's address:	
Doctor's telephone number:	
Blood group:	
Allergies?	
Prescribed medication for the trip?	
	If prescribed medication will need to be administered at King's Park, please complete the 'Parent/Carer Agreement for The Bliss Charity School to Administer Medicine' form and hand it in to the group leader on the day of the trip.
Other relevant information regarding	
the young person's health or wellbeing:	
For example	
Travel sickness	
<ul><li>Hay fever</li><li>Bed wetting</li></ul>	

DIETARY INFORMATION	
Please indicate any special dietary requirements the young person may have due to medical, religious or moral reasons.	
PARENTAL DECLARATION	
A parent/carer must complete the following section if the young person is under 18 years of age.	
I undertake to inform the group leader, or headteacher, as soon as possible of any relevant change in medical circumstances occurring before the visit.	
In the case of an accident or illness whilst away from home, I consent to any necessary medical treatment to be undertaken by first aiders or healthcare professionals.	
I give permission for the young person named above to travel in transport provided by the school to/from King's Park Centre and, if necessary, to travel in transport provided by the King's Park Centre.	
I give permission for the young person named above to stay overnight at King's Park Centre for the duration of the visit and to take part in the activities outlined in the school's itinerary.	
Signed:	
Printed:	
Date:	
Please return this form to the school no later than Tuesday 16 <sup>th</sup> April 2024.	