

MIDLOTHIAN COUNCIL – EDUCATION DIVISION ME2

Parental Agreement to Educational Excursion that DOES NOT involve Overnight Educational Excursion/Foreign Travel/Outdoor Education

SECTION A – To be retained by parent or guardian

- 1. Date of Excursion Wednesday 13th June
- 2. Time 9.30 – 1.15
- 3. Destination Beeslack
- 4. Description of activity Mountain Biking
Member of staff responsible for excursion Mrs Duncan
- 5. Parent helpers required, please detail below if you are able to accompany the class.
- 6. Telephone Number School Hours 0131 271 4625
- 7. Cost to pupil £3 Packed lunch required - No
- 8. Please send your child dressed for the weather
Note: If you wish to consult further on this please contact the School office.

Signed Ailsa Duncan Principal Teacher Date 07.06.18

* Unscheduled delays may occur on excursions. Should this happen, the member of staff in charge will notify the school as soon as possible.

PLEASE RETURN SECTION B TO THE CLASS TEACHER BY 12.6.18

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SECTION B – To be completed by parent or guardian and returned

Excursion To **Mountain Bike Festival** Date of Excursion 13.6.18

Child's Name Class ... P6 ... Date of Birth

Address Telephone Number

Please detail any medical factors which might affect participation

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Details of any drugs or medicines taken regularly by your child (*indicate type and frequency of use*)
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Telephone number or address at which emergency contact can be made when the party is away

I agree to my child taking part in the above excursion, and undertake to inform the Head of Establishment of any changes of circumstances that might affect participation. I agree to my child receiving emergency medical treatment, including blood transfusion/anaesthetic as considered necessary by the medical authorities present. I understand that there is no personal accident insurance.

I enclose a payment of _____

Signed by Parent or Guardian Date