



ANNUAL PERMISSION FORM

Child's Name Class

To comply with the Data Protection Act 1998 and the new General Data Protection Regulation (May 2018), we need to ask your consent for the following (tick as appropriate):

- I give permission for my child to **travel by school minibus between Othery Village School and Middlezoy Primary School.**
- I give permission for my child to **travel by private car in the event of an emergency** (e.g. to take them to hospital).
- I agree to my child 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 give permission for my child to **participate in food tasting sessions** as part of lessons or to eat food provided for celebrations.
Please note that my child has an allergy to
- I give permission for my child to **wear face paints or make up** for school productions and use make up remover.
Please note that my child has an allergy to
- I give permission for my child to **go out of the school grounds** as part of their curriculum studies during the school day.
- I give permission for my child to **watch PG rated films** or clips where they are deemed suitable by teachers or linked to the curriculum (eg Chronicles of Narnia)

Please make any further comments here:

I understand that should any of the information on this form change, then it is my responsibility to let the school know as soon as possible.

Signed:

Print Name:.....

Relationship to child:

Date:.....