

REPLY SLIP TO BE RETURNED TO FINANCE OFFICE: **Summer School 2021 – Aug 16<sup>th</sup>-19<sup>th</sup>**

***This form must be completed by the parent/carer of each child attending. If circumstances change in any way before our trip, please advise the trip organiser.***

Pupil Name: ..... Tutor Group: .....

**Medical Information about your child:**

- a. Any conditions requiring medical treatment, including medication or Allergies? YES/NO  
 If YES, please give details below:  
 .....  
 .....
- b. Please outline any special dietary requirements your child may have (e.g. vegetarian / vegan / dairy free etc.)  
 .....  
 .....
- c. Is your son/daughter allergic to any medication? YES/NO  
 If YES please give details below:  
 .....  
 .....
- d. When did your son/daughter last have a tetanus injection? .....

Signed ..... (Parent/Carer) Name ..... (Please print) Date .....

**\*Please delete as appropriate:**

- I authorise the staff to act on my behalf should any emergency treatment be required by my child during the course of the trip.
- I understand that GTS Academy will not be liable to him/her for any loss, injury or damage suffered, other than such as may be caused by the negligence of GTS Academy or their employees.
- I understand that GTS Academy do not accept any liability for personal belongings.
- I confirm that I have kept the School updated with all medical information. If any circumstances change between now and the trip I will write to the **Medical Officer**.
- I give authorisation for photographs of my son/daughter whilst on this trip and agree to images being used for promotional materials both within and outside the school including third party agencies that are working with the school. I am aware that names and images may appear together.

**Primary Contact Details:**

Name..... Relationship.....  
 Home Number ..... Mobile Number ..... Work Number .....

**Alternative Emergency Contact Details:**

Name..... Relationship.....  
 Home Number ..... Mobile Number ..... Work Number .....

