

CONFIDENTIAL MEDICAL REPORT AND CONSENT FORM
(For trips involving overnight stay)

Student's Name: **Room:**

Parent's/Caregivers' Address:

Telephone: (Day) (Night)

Emergency Contact: Name:Phone:

I give permission for my son/daughter to participate in

atDate

- * I agree that he/she should take part in such activities and such necessary duties as may be required by staff
- * I authorize the obtaining on my behalf any medical assistance if, in the opinion of the staff, such treatment is necessary, and agree to meet any costs incurred.
- * I understand that the school will not accept responsibility for loss or damage of personal property (check own household insurance policy).
- * Should my son/daughter be involved in a serious disciplinary problem, I accept that he/she may be sent home at my expense.

1. Is your child presently taking tablets and / or medicine? **YES / NO** (circle one)

If YES, please state the name of the medication and dosage.

All medicines must be handed to the teacher-in-charge prior to leaving with your child's name, the dose to be given and when it should be taken. ***Please do not allow children to be in possession of any medicine whilst on the trip, with the exception of those using inhalers for asthma on a self-monitoring basis.***

2. Please **circle** if your child suffers any of the following:

Bed wetting Fits of any kind. Heart condition

Dizzy spells Sleep walking Asthma

Blackouts Migraine Travel sickness

Other (please specify)

Please **circle** and **specify** if your child has an allergy to :

Penicillin.....Any foods.....Drugs.....

Insects.....

Other (please specify):.....

It is really important that you disclose ANY medical conditions that may affect your child's safety.

Last tetanus immunization was(NB Tetanus injections are needed every 10 years)

Is this the first time your child has been away from home? **YES / NO**

Parent / Caregiver Signature : **Date:**

This report is to assist us in case of any eventuality. All information is held in confidence.