



GENERAL PERMISSION FORM

FOR ACTIVITIES CLOSE TO THE SCHOOL

TRANSPORT/WALKING: -

I give permission for my child

in Grade to participate in excursions and sporting activities within walking distance of the school.

I authorise the teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary.

Signed:Date.....

Parent's Name: **(Please Print)**

.....

