LONDON BOROUGH OF RICHMOND UPON THAMES SCHOOL JOURNEY MEDICAL FORM

PLEASE ANSWER ALL QUESTIONS

HEATHFIELD JUNIOR SCHOOL, COBBETT RD, TWICKENHAM, TW2 6EN

JOURNEY TO BUSHCRAFT- 26th and 27th May 2022

Class:

T	
Name of Pupil :	DOB
Is your child AT PRESENT under medical supervision or having any form of medical	I treatment? If so please give details
CONDITION	
TREATMENT/MEDICATION	
<u>PLEASE NOTE</u> If your child is taking any medicines, a supply sufficient to last the just the departure date, together with written details of the dosage. <u>This applies also to YOUR CHILD SUFFERS WITH ASTHMA TWO NEW INHALERS MUST BE HAND</u>	medicines which may be needed only occasionally. IF
Has your child IN THE PAST suffered from [please give details]	
Asthma	
Fits, Convulsions or BlackoutsAny Serio	ous Illness
HAS ANY RESTRICTION BEEN PLACED ON YOUR CHILD'S ACTIV	/ITIES, ON MEDICAL ADVICE?
Swimming Climbing or using equipment at heights	Strenuous Activities
Any other restrictions	
IS THERE ANYTHING YOUR CHILD SHOULD NOT EAT	
DOES YOUR CHILD WET THE BED This would not prevent your child from travelling, but the party leader must be informed.	YES / NO / OCCASIONALLY
DOES YOUR CHILD SUFFER FROM TRAVEL SICKNESS	YES / NO
HAS YOUR CHILD BEEN VACCINATED AGAINST POLIOMYELITIS	YES / NO Date
HAS YOUR CHILD BEEN PROTECTED AGAINST TETANUS	YES / NO Date
I consent to being examined, if r the school journey.	necessary, by the School Medical Officer, prior to
SIGNED	Parent/Guardian

IMPORTANT Name and Address of FAMILY DOCTOR
I consent to receiving professional medical advice and treatment in the event of an emergency [including X-Rays, Anaesthetics etc.] while on school journey.
SIGNED Parent/Guardian
Please provide the following information for use in the event of an emergency:- NAMES [Parents/Guardians – please give full names]
Address
Telephone HOME
WORK NO'S
MOBILE NO'S

PLEASE NOTE Parents should notify the party leader in writing if there is any change in the information given above, before the journey commences. Parents should obtain advice from the family doctor and also notify the party leader, if the child becomes a contact of infectious disease during the three weeks before the journey date.

PLEASE NOTE ALL QUESTIONS MUST BE ANSWERED

IF YOU HAVE ANY MORE INFORMATION THAT MAY ASSIST THE PARTY LEADER IN THE EVENT OF AN EMERGENCY, PLEASE USE THE SPACE BELOW:-