



Home School Information 2019/2020

To help us in our organisation and to promote safe and healthy practises would you be so kind as to tick the relevant boxes for our information. Please inform us of any changes. Many thanks. Mrs Polly Kossowicz

My child suffers from asthma and I have informed the school of the necessary medication required.

I give permission for my child to walk with the class or school to events at the Parish Rooms or Parish Church (supervised).

My child suffers from the following allergies (including any food allergies):

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.....

I give permission for my child to receive occasional sweets or cakes from friends celebrating birthdays etc. These will normally be given out at the end of the day.

Child's Name

Signed:

Print name:

Date: