



Sandwell Forest School Initiative
at
Moat Farm Junior

Forest School Permissions Form

Dear Parent/Carer/Guardian

I agree to my child taking part in regular forest school activities during the coming year on the understanding that sessions will be led by a qualified level three forest school practitioner.

I understand that my child will, when at an appropriate level, have opportunities to work with hand tools and small fires through the course of the forest school journey.

I understand that they will work in groups with an adult to child ration of 1:8 at all times.

I agree to my child being photographed during forest school sessions for my child's, the school's or Sandwell Forest School Initiative's purposes.

I confirm that the medical information supplied on my child's school registration form is up to date.

As an additional precaution we are required to ask you in more detail about allergies and insect stings please highlight the appropriate statement.

My child has never been stung by a wasp or a bee

My child has been stung by a wasp or a bee and made a normal recovery

My child has been stung by a wasp or a bee and had an allergic reaction

If you highlighted the last statement we will contact you shortly for further information.

I agree to the use of waspeze if necessary Y// N

I agree to the use of burneze if necessary Y // N

I agree to the use of antihistamine if necessary Y// N

My child has the following food allergy/ allergies:

Child's Name _____ Class _____

Parent/Carer/Guardian signature _____

Parent/Carer/Guardian name _____

Date _____

Please return this form your child's teacher.