

BLESSED WILLIAM HOWARD CATHOLIC HIGH SCHOOL

CONSENT INFORMATION

Name of pupil: _____

I give consent to my child travelling on the school minibus.

Parent/Guardian Signature: _____

I give consent to my child attending off-site Sports Activities, including Sports Fixtures and Inter-House Athletics as well as on-site extra curricular Sports Activities.

Parent/Guardian Signature: _____

I give consent to my child carrying **prescribed** medication (e.g. Migralve) on their person and to be responsible for its administration in school.

Name of medication: _____

Parent/Guardian Signature: _____

I agree that my child should carry an Epi-pen on their person at all times in school and I will ensure that a spare pen will be available in the school office.

Please indicate if not applicable: _____

Parent/Guardian Signature: _____

I consent to my private e-mail address being used for school-home liaison.

My e-mail address is: _____

Parent/Guardian Signature: _____

I give consent to my child having Internet access according to our School ICT Policy which is available to view on the school website.

Parent/Guardian Signature: _____