

PLEASE COMPLETE FORM AND RETURN TO SCHOOL OFFICE BY MONDAY 24TH APRIL AT THE LATEST
YEAR 4 RESIDENTIAL TO HOME FARM – JUNE 2023

Information Form

Child's Name _____

Class _____

I will provide a packed lunch for my child for the first day as requested. ☐

I am in receipt of benefits, therefore my child is entitled to free school meals, and would like a school packed lunch for the first day. ☐

Medical

If your child is receiving medication or has a known medical condition, please give details and let us know of any changes. Please also list any medicine(s) your child should take with them on the residential (eg Epi-pen, Inhaler etc)

Dietary

Please provide any special dietary requirements eg Coeliac/Vegetarian/Vegan/Halal/Food Allergies

Allergies

Are there any known allergies (not dietary) that we need to be made aware of?

Additional Needs

We need to be aware of any additional needs children may have eg bedwetters etc. Please attach further information if necessary.

Tetanus – is your child up to date with their tetanus injections? ☐

Signed Parent/Carer

Date.....