

## **ACTIVITY AND MEDICAL CONSENT**

As your daughter will be undertaking an activity that does inherently involve some risk of personal injury it is essential that you give permission for them to take part and for medical treatment should it be needed. I am writing to ask for your consent for **any** medical treatment as advised by medical staff.

Please be aware that this includes but is not limited to the administration of a blood transfusion or anaesthesia in the event that an injury requires surgery. Normally permission would only be sought in the event of serious injury and while it is very unlikely that it will be needed to have your consent would certainly ease what would be traumatic circumstances for your daughter.

Accordingly, please give your consent for your child to:

1. Take part in **all** activities on the trip. In addition to skiing some ski trips include ice skating, bowling, swimming, sledge rides and watching ice hockey.
2. Receive any medical treatment as prescribed by medical professionals (within the bounds of their training and expertise). This includes but is not limited to ski instructors and local healthcare professionals as well as first aid trained Sydenham staff.

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As her parent/guardian I give permission for \_\_\_\_\_

to take part in **all** activities on the Sydenham School ski trip. In the event of serious injury, I give my consent for **all** medical treatment pertaining to the injury, including the administration of anaesthesia, and/or blood transfusion as necessary.

Please complete the appropriate option below.

- My daughter suffers no serious side effects from anaesthesia.
- My daughter has experienced problems with anaesthesia in the past.
- I do not know if my daughter experiences problems with anaesthesia.

Please give details of your daughter's GP:

Name of GP/Practice: \_\_\_\_\_

Address:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_