Foxborough Primary School
Common Road, Langley, SL3 8TX
Tel: 01753-546376

Permission Form for Parental Consent				
Forename:	**Surname:**	**Class:**	**Address:**	**Tel No(s):**

Name of Parent/Guardian:

I declare that I am the legal parent or guardian of the above child.
I give consent for my child to be included in the following activity(ies):

□ School Trips –	To take part in school trips and activities that take place off school premises and to be given first aid or urgent medical treatment, if required, in line with procedures followed during the normal school day.
□ Internet Access –	All school internet is secure and has filters to ensure pupils cannot access inappropriate material (please see school internet policy for further information).
□ Data Exchange –	We will not give information about you to anyone outside the school without your consent unless the law and our rules allow us to.
□ Copyright Permission –	I agree to abide by the school's policy.

Signed:	Date: