



Slough and Eton Church of England Business and Enterprise College

*This form must be completed by a Parent/Carer if the participant is under 18 years of age,
or with learning difficulties*



Trip:	Date of trip:
STUDENT INFORMATION	
Pupil Name:	Year/Tutor Group:
Pupil Address:	Date of Birth:
EMERGENCY CONTACT INFORMATION	
Emergency Contact Name:	Relationship to Pupil:
Address (if different from above):	
Telephone 1:	Telephone 2:
MEDICAL DETAILS	
Conditions: <i>(Give details of any pupil conditions i.e., diabetes epilepsy, allergies etc)</i>	
Current Medication: <i>(Give details of any medication the pupil is currently undertaking)</i>	
Name of family doctor:	Address of family doctor:
Telephone no:	
TRIPS AND VISITS CODE OF CONDUCT	
<p><i>Pupils must be on best behaviour at all times and maintain high standards of appearance</i></p> <p><i>Pupils will follow all instructions given to them by members of staff</i></p> <p><i>Pupils must NOT endanger their own or anyone else's safety</i></p> <p><i>Pupils must report any accidents or breaches of safety they notice, to a member of staff</i></p> <p><i>Pupils must be aware of all arrangements, particularly meeting times and places</i></p> <p><i>Pupils must represent the school in a positive manner at all times</i></p> <p><i>Pupils must be aware that the trip leader decisions are final</i></p>	
DECLARATION	
<p><i>I give permission for this pupil to go on the trip</i></p> <p><i>I declare the information I have given on this form is correct</i></p> <p><i>I will support the school to maintain the standards outlined in the trip and visits code of conduct</i></p> <p><i>I understand that pupils <u>not</u> complying with the code of conduct will be sanctioned by the school and may be <u>banned</u> from future trips</i></p>	
SIGNATURE:	DATE: