



PARENT PERMISSION
RESIDENTIAL TRIP – North Star

I _____ Parent/Legal Guardian of

_____ Class _____

give permission for my child to attend the above trip. Whilst I am aware that every care will be taken by JPS staff in transporting and supervising my child, I shall not hold them responsible or take legal action against them in the unfortunate case of accidental injury or for circumstances beyond the control of those organizing the event unless caused negligently. Furthermore, I confirm that JPS has my full emergency contact details and my child's up-to-date medical history.

I understand that participation on school trips is an additional and valuable activity for my child and I agree to pay the full amount of the trip.

Signed: _____ *** Date:** _____

Residential visits are subject to final Ministry of Education approval.

OVERNIGHT SCHOOL TRIP

It is a requirement that the information below is completed and returned to school for all children who are going on overnight journeys out of Dubai.

Name of Child _____ **Class** _____

Telephone Numbers: Home: _____

Mum Mobile: _____ **Dad Mobile:** _____

Emergency Contact during the school trip: Phone _____

Please list any allergies / medical issues / food intolerances/ dietary needs which we should be aware of :

ACCIDENTS AND EMERGENCIES

In the event of an accident or illness while on the trip, I give consent for Northstar staff to initiate first aid and to take my child to the closest appropriate hospital for medical/surgical treatment if deemed necessary.

Signature (Parent/Guardian) _____ **Date** _____ *

(* Signature required)