

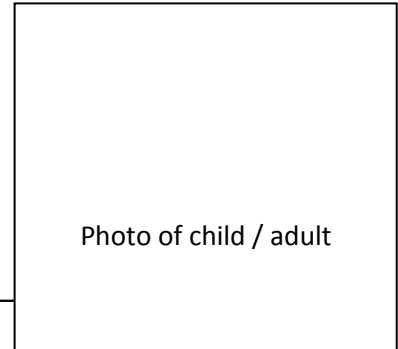
ICE CARD (in case of emergency whilst on visits/outings)

Name: _____

Date of Birth: _____

Address: _____

E-Mail Address: _____
Any Relevant Information Medical Conditions/Allergies/medications:



Emergency Contact Name: _____

Emergency Contact Number: _____

Child's Medical Number, GP, name of practice, telephone number:

I hereby consent to my child going on local outings (journeys of any distance will require my consent in writing beforehand). The information provided here may be used in the event of an emergency. Parents/carers will be contacted at the earliest convenience.

Signature of Parent/Carer: Date.....

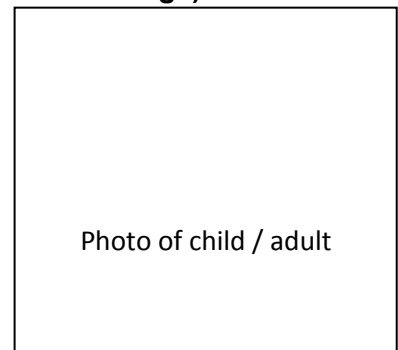
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