





The Nicholas Hamond Academy – Parental Consent Form 'Sherlock Homes and the Hunt for Moriarty' – 7^{th} October 2025

Return to: Mr. Hatfield	Telephone: 01760 721480
The Visit Leader will only divulge information on this form t	o other staff as necessary, to ensure the welfare
and safety of the participant.	
Group: Mixed	Place of visit: Playhouse Theatre, Norwich
Method of travel: coach (seat belts fitted as standard)	
To be completed by the Parent / Carer:	
I am willing for my child:	Tutor Group:
To take part in the above visit / journey and, having read the information provided, I agree to his / her taking part in the activities described. I understand that the staff responsible for the activities will take all reasonable care of participants. I agree to my child receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.	
Emergency Contact Details: Name of parent(s) / carers(s):	
(i): Telephone:	
(ii): Telephone:	
Signature of Parent / Carer:	Date:
Medical Information:	
Please tell us about any allergies, e.g medicines, food, bee stings etc	
Are you currently taking any medication, if so please give details below	
Please provide any other information conditions which you for Visit Leader should be aware of: e.g travel sickness	eel might be useful in an emergency, or that the