

Pack List

(These are items every child **must** bring with them if they wish to stay):

- Sleeping bag
- Blanket
- Pillow
- Pyjamas
- Slippers
- Full change of clothes (x1)
- Warm coat
- Raincoat
- Jumper
- Welly Boots
- Toothbrush
- Toothpaste
- Flannel
- Soap
- Towel
- Water bottle
- Overnight toilet arrangements (see Mrs Pinchback)
- Teddy Bear
- Medication (if required)

Please ensure **everything** is named!!!

Children **must not** bring:

- Any food or drinks
- Any electronic devices (including mobile phones)

I hereby give consent for to attend the Year 2 Sleepover at Briscoe Primary School on 9th November 2018.

Emergency Contact Name, Relationship and Number (This must be a number which is contactable for the **entire** sleepover period.)

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Alternative Emergency Contact Name, Relationship and Number (This must be a number which is contactable for the **entire** sleepover period.)

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Name of GP

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Address of GP

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Phone Number of GP

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Does your child have any dietary requirements?

Yes / No

If yes please provide details below.

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Does he/she take any regular medication?

Yes / No

If yes please provide details below.

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Does your child have any allergies (including hay fever)?

Yes / No

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Does he/she have any overnight toiletry requirements?

Yes / No

If yes, please pop in for a quiet chat with Mrs Pinchback.

Name of Child: Class

I hereby give permission for any first aid, as necessary, to be administered during the Year 2 sleepover taking part in 2015, including the following:

Please Tick:

Plasters	
Microporous Tape	
Bite and Sting Relief (Liquid)	
Bite and Sting Relief (cooling spray)	
Medical Wipes	

If you do not wish for an item listed above to be used, please leave the box blank.

Signature Parent/Carer

Date