Appendix 3

Sample Parent Information and Consent Forms

**CHILD PEDESTRIAN TRAINING**

Dear Parent/Guardian

I am delighted that your child will be taking part in Stockton-on-Tees Borough Council’s Child Pedestrian Training Course.

Child pedestrian training will involve practical training at the roadside. Small groups of children will be taken out of school to practice the following important skills:

* To choose a safe place and routes to cross the road.
* To recognise the dangers and hazards.
* Identify alternative places to cross.
* To cross safely at parked cars.
* To develop a safe strategy for crossing near parked cars when there are no other safer alternatives.
* To cross safely at junctions.
* To develop a strategy for looking in all directions when crossing at simple and complex junctions.

All trainers and pupils must wear a high visibility jacket which will be provided.

Please ensure your child dresses appropriately for the weather conditions.

Please note we cannot commence training unless your child has a signed permission slip.

If you require additional information, please contact us. Our details are:

Email Address and Telephone Number

Yours faithfully,

# Parental Consent Form

School Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class:\_\_\_\_\_\_\_\_

I give my consent for my child to take part in Stockton- on-Tees Borough Council’s Child pedestrian Training programme.

I understand that this will involve training on the public roads.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent/Guardian)

Date: \_\_/\_\_/\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Postcode\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return the form to school as soon as possible.

For further information, please contact:

Contact Name

Contact Address

Contact Phone number

Contact email