 **WALKING HOME ALONE CONSENT FORM (Year 5 & 6 only)**

Name of child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class: \_\_\_\_\_\_\_\_\_\_\_\_\_

I give permission for my child to walk home (or to another specified destination) on their own after school.

I have explained to my child the safety aspects of walking home on their own.

I understand that it is the responsibility of parents, and not the school, once my child has left the school premises.

I will inform the school in writing if this changes at any time.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please complete and return this form to the school office before Thursday 3rd September 2020. The form can be completed online and email to:**

**office@alexandra.hounslow.sch.uk**