



## Llangewydd Junior School

Headteacher: Mrs. K Green; Deputy Headteacher: Mrs L Evans; Assistant Headteacher: Mr D Evans;  
ALNCo. : Mrs T Porter; Other senior leadership team members: Mrs S Jones & Mrs W Mitchell

### Cross Country Race Consent Form

**Event Date:** Saturday, October 18th

**Location:** Pencoed Comprehensive School

**Arrival Time:** 8:30am

Dear Parents/Carers,

Please complete and return this consent form by Wednesday 10<sup>th</sup> October to confirm your child's participation in the upcoming Cross Country race.

**Child's Full Name:** \_\_\_\_\_

**Year Group:** ☐ Year 3 ☐ Year 4 ☐ Year 5 ☐ Year 6

I give permission for my child to take part in the Cross Country race on Saturday, October 18th at Pencoed Comprehensive School.

I understand and agree to the following:

- I am responsible for my child throughout the event.
- No dogs are allowed on site.
- I will ensure all litter is taken home.
- My child will arrive by 8:30am for registration and warm-up.
- My child will be dressed appropriately for the weather, including suitable footwear.
- I will ensure my child attends any lunchtime practice sessions organised by Mrs Jones, where possible.

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**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Number:** \_\_\_\_\_

**Medical Conditions/Allergies (if any):** \_\_\_\_\_

**Parent/Carer Name (please print):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

If you have any questions or concerns, please contact Mrs Jones:  
sophie.jones@llangewyddjs.bridgend.cymru

Thank you for your support!

Mrs Jones