



Richard Durning's Endowed Primary School
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Dear Parent

Consent Form: Use of Emergency Salbutamol Inhaler
Richard Durnings Endowed Primary School

Child showing symptoms of asthma= / having asthmas attack

1. I can confirm that my child has been diagnosed with asthmas / has been prescribed an inhaler (delete as appropriate).
2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed: _____ Date: _____

Name:(print) _____

Child's name: _____

Class: _____

Parent's address and contact details:

Telephone Number: _____

Email address: _____

