

# CANIATÂD RHIENI AM YMWELIAD

**GWEITHGAREDD :**

**DYDDIAD(AU):**

**ENW'R DISGYBL:** .....

**Disgrifiad o'r gweithgaredd arfaethedig :**

Gwahoddir disgyblion Blwyddyn 5 a Blwyddyn 6 i fynychu gweithgareddau cyfoethogi dros yr haf. Byddant yn cael eu cynnal yn .....

Mae'r gwasanaeth yma'n cael ei ddarparu gan wasanaeth Ieuencid a Gwasanaeth Cerdd Castell-nedd Port Talbot yn ogystal â chwmni chwaraeon 'Sgiliau '.

Gwahoddir eich plentyn i fynychu'r gweithgareddau o:

- Ddydd Llun, Awst 17eg - dydd Iau, Awst 20fed  
*neu*
- Ddydd Llun, Awst 24ain - dydd Iau, Awst y 27ain.

Nodwch a ydych chi am i'ch plentyn fynychu'r sesiwn **bore** neu **brynhawn**.

Bydd eich plentyn yn gallu cymryd rhan mewn ystod eang o weithgareddau gan gynnwys chwaraeon, cerddoriaeth, celf a chrefft. Bydd gan bob sesiwn (**bore neu brynhawn, ond nid y ddau**) le i uchafswm o 24 o blant, felly mi fydd ar sail y cyntaf i'r felin.

Atebwch trwy ddanfon y ffurflen hon at [youth.service@npt.gov.uk](mailto:youth.service@npt.gov.uk)

Wedi darllen disgrifiad uchod o'r ymweliad / weithgaredd, ystyriaf fod y disgybl uchod yn abl i gymryd rhan yn y gweithgaredd, a chytunaf iddo/iddi gymryd rhan.

Rhoddaf ganiatâd i unrhyw driniaeth feddygol, ddeintyddol neu lawfeddygol, gan gynnwys defnyddio anesthetig pe byddai hynny'n angen rheidiol.

Hoffwn i'm plentyn fynychu ar y dyddiadau canlynol a'r amseroedd canlynol.

**Dewiswch naill ai wythnos 1 neu wythnos 2 a naill ai bore neu brynhawn.**

Dileuwch fel sy'n briodol :

**Wythnos 1**

Dydd Llun 17eg Awst - bore

*neu*

Dydd Llun 17eg Awst - prynhawn

Dydd Mawrth 18fed Awst - bore

*neu*

Dydd Mawrth 18fed Awst - prynhawn

Dydd Mercher 19eg Awst - bore

*Neu*

Dydd Mercher 19eg Awst - prynhawn

Dydd Iau 20fed Awst - bore

*Neu*

Dydd Iau 20fed Awst - prynhawn

*Neu*

## Wythnos 2

Dydd Llun 24ain Awst - bore  
neu

Dydd Llun 24ain Awst - prynhawn

Dydd Mawrth 25ain Awst - bore  
neu

Dydd Mawrth 25ain Awst - prynhawn

Dydd Mercher 26ain Awst - bore  
Neu

Dydd Mercher 26ain Awst - prynhawn

Dydd Iau 27ain Awst - bore  
Neu

Dydd Iau 27ain Awst - prynhawn

Llofnod: \_\_\_\_\_ (Rhiant/Gwarcheidwad)

Dyddiad: \_\_\_\_\_

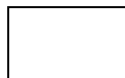
Cyfeiriad: \_\_\_\_\_

Rhif Ffôn: Cartref \_\_\_\_\_ Symudol: \_\_\_\_\_

Cyfeiriad neu rif ffôn gwahanol y gellid cysylltu â nhw mewn argyfwng:

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

OS OES ALERGEDD NEU ANGEN TRINIAETH FEDDYGOL AM UNRHYW AFIECHYD AR  
EICH PLENTYN, A WNEWCH CHI DICIO'R BLWCH A DARPARU MANYLION ISOD.



### Nodiadau

- Bydd y gweithgaredd hwn yn digwydd mewn sesiynau bore a phrynhawn. 9am i hanner dydd ac 1pm i 4pm. Gall eich plentyn fynychu naill ai sesiwn bore neu brynhawn.
- Ni ddarperir unrhyw fwyd na chludiant.

## **PARENTAL CONSENT FOR VISIT**

**ACTIVITY / VISIT:**

**DATE (S):**

**PUPIL NAME:** .....

**Description of the proposed activity / visit :**

Year 5 and year 6 pupils are invited to attend summer enrichment activities to be held at ..... This will be provided by Neath Port Talbot Youth service and Music Service as well as Sports company 'Sgiliau'.

Your child is invited to attend the activities from Monday August the 17<sup>th</sup> to Thursday August the 20<sup>th</sup> or Monday August 24<sup>th</sup> to Thursday August the 27<sup>th</sup>. Please state whether you want your child to attend the morning or afternoon session.

Your child will be able to participate in a broad range of activities including sport, music, arts and crafts. Each session (a morning or an afternoon, but not both) will have a maximum of 24 children and it will be on a first come, first served basis. Please reply by sending this form to [youth.service@npt.gov.uk](mailto:youth.service@npt.gov.uk)

Having read the above description of the proposed activity / visit, I consider that the above named pupil is physically capable of undertaking the activities described and I hereby agree to him/her taking part.

I hereby consent to any medical, dental or surgical treatment, including the administration of an anaesthetic, which may be considered necessary for the above named pupil.

I would like my child to attend on the following dates and the following times

**Please choose either week 1 or week 2 and either morning or afternoon.**

Delete as appropriate

**Week 1**

Monday 17<sup>th</sup> August morning session

or

Monday 17<sup>th</sup> August afternoon session

Tuesday 18<sup>th</sup> August morning session

or

Tuesday 18<sup>th</sup> August afternoon session

Wednesday 19<sup>th</sup> August morning session

Or

Wednesday 19<sup>th</sup> August afternoon session

Thursday 20<sup>th</sup> August morning session

Or

Thursday 20<sup>th</sup> August afternoon session

Or

**Week 2**

Monday 24<sup>th</sup> August morning session

or

Monday 24<sup>th</sup> August afternoon session

Tuesday 25<sup>th</sup> August morning session

or

Tuesday 25<sup>th</sup> August afternoon session

Wednesday 26<sup>th</sup> August morning session

Or

Wednesday 26<sup>th</sup> August afternoon session

Thursday 27<sup>th</sup> August morning session

Or

Thursday 27<sup>th</sup> August afternoon session

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

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

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

\_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work / Mob \_\_\_\_\_

Alternative address and telephone numbers to be contacted in an emergency:

\_\_\_\_\_

\_\_\_\_\_

IF YOUR CHILD HAS ANY ALLERGIES, REQUIRES REGULAR MEDICAL TREATMENT FOR ANY ILLNESS OR DISABILITIES, PLEASE TICK THE BOX AND PROVIDE DETAILS BELOW.

Notes

- This activity will take place in morning and afternoon sessions. 9am to Noon and 1pm to 4pm. Your child can attend either a morning or an afternoon session.
- No food or transport will be provided