**Da riconsegnare al docente che accompagnerà la classe**

**I.C. “R. Giovagnoli” Monterotondo**

**Campo Scuola Classi 3^**

**“Policoro” 7-11 maggio 2018**

Alunno \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ classe \_\_\_\_\_\_\_\_\_\_\_

**SEGNALAZIONI VARIE**

Allergie o intolleranze alimentari

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Medicinali/cure

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Il sottoscritto...........................................………………………………………………………..............genitore

dell'alunno/a...............………………………………..............…………………………..........cl. ….. sez. …….

dichiara di aver ricevuto e di aver presa visione del promemoria riguardante il Campo Scuola e di essere

sempre reperibile al Numero Telefonico \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Data: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Firma

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