

October 2023

Headteacher - Patrick Earnshaw
Deputy Headteacher - Mathew Downs
Assistant Headteacher (Head of Sixth Form) - Lisa Swan

Dear Parent/Guardian,

As part of the Sixth Form Geography course, we have been undertaking a study of Coastal Landscapes as part of the physical Geography requirement of the AQA specification. With this in mind, I am pleased to be able to offer your child the opportunity to visit local coastal landscapes; Barton-on-Sea and Bournemouth. The trip will help students to understand how coastal processes can impact on the landscape, studying local places and practice data collection skills in preparation for their A-Level Geography coursework. The trip will allow students to collect and share individual data about the impact of the coastal changes on the character and landscape of the locations using GIS.

The visit will take place on **Friday 20th October 2023. We aim to leave school at 9.00am and return by 3pm in time for school transport.** Students will need to meet at the front of school by reception. Students need to ensure they are wearing suitable clothing for the day (warm clothing, including a raincoat) and they will need to bring plenty of food and drink.

The cost of this visit is £12.00. This covers the cost of transport to and from the locations and insurances. Payment should be made using the school's on-line WisePay facility. Please make a note of your WisePay receipt reference, as you will need to provide this on the attached slip/ consent form. Receipts are generated automatically on WisePay and sent to the email address you supply when making the payment.

This will be a valuable experience, which I hope your child will find of great benefit.

If you would like your child to take part, please complete the attached reply slip and medical form and return them to your child's Geography teacher no later than **Friday 13th October 2023.**

Yours faithfully,



Mr Houghton
Head of Geography



STUDENT NAME TUTOR

TO BE RETURNED TO

PARENTAL CONSENT FORM (for children and young people under the age of 18)	
The purpose of this form is to obtain your consent for your child to take part in the proposed event.	
DATA PROTECTION	
Highcliffe School is a Data Controller for the purposes of the General Data Protection Regulation (2018). This Act regulates how we obtain, use and retain information about individuals. The information you supply is being collected for the purpose of gaining your consent. When you sign <u>or</u> complete this form, you are providing your consent to Highcliffe School holding your personal information for this purpose. This information is used only for the purposes for which it is given and is not passed on to a third party.	
DETAILS OF PROPOSED EVENT	
Event: Year 12 Coastal Barton and Bournemouth Trip – Friday 20 th October 2023	
Additional information:	
ACKNOWLEDGEMENT OF RISK	
This event poses additional risks to those encountered during a normal day. We have assessed those risks and believe that the planning undertaken and systems agreed to control and manage the risks have reduced the chance of harm to an acceptable level. To help with safety all participants are expected to behave in a responsible manner at all times during the event. They must take direction from any leader and follow all instructions or guidance given. Details of planning and risk assessment are available on request.	
STUDENT'S DETAILS	
Full name:	
Home address:	
MEDICAL / EMERGENCY CONTACT INFORMATION	
PRIMARY EMERGENCY CONTACT DETAILS	ALTERNATIVE EMERGENCY CONTACT DETAILS
Surname:	Surname:
Forename:	Forename:
Home address (inc postcode):	Home address (inc postcode):
Home telephone number:	Home telephone number:
Mobile telephone number:	Mobile telephone number:
Relationship to student:	Relationship to student:
GP name:	GP surgery address (inc postcode):
Surgery telephone number:	



STUDENT NAME TUTOR

TO BE RETURNED TO

STUDENT'S MEDICAL INFORMATIONPlease provide detail of all medical conditions and illnesses and any treatments required to maintain health.
This information helps us to keep your son/daughter safe

Asthma or bronchitis	YES / NO	Allergies to any known medication	YES / NO
Heart condition	YES / NO	Any other allergies, eg material, food, plasters	YES / NO
Fits, fainting or blackouts	YES / NO	Other illness or disability	YES / NO
Severe headaches	YES / NO	Travel sickness	YES / NO
Diabetes	YES / NO	Regular medication	YES / NO

If the answer to any of these questions is YES, please give details:

TRIP PAYMENT

All trip payments are to be made using the school's online Wisepay facility

I have paid using Wisepay and my reference number is YES / NO

CONSENT DECLARATION

I have received full details of the event, am satisfied with the arrangements and give consent for my child to take part in the proposed event. YES / NO

I give consent for him / her to receive emergency medical treatment, including anaesthetic, as considered necessary by any medical doctor present, should the need arise. I have provided detail of all medical conditions and illnesses and any treatments required to maintain health. I give consent for the members of staff to act 'en loco parentis' for the duration of the trip. YES / NO

I give consent for my child to be photographed during the event and for these photographs to be used in school media. YES / NO

Any other information that may affect the safety of my child or any other persons and/or the organisation of the event has been provided to the organiser. YES / NO

COVID-19 GUIDANCE

In the event that your child begins to show symptoms of Covid-19 or tests positive for Covid-19 prior to the trip date or on the morning of the trip you must inform the school in line with our school policy and accept your child may not be able to attend the trip and may still be charged.

Please note that the venue you are travelling to may have their own policy regarding Covid-19 safety measures which your child will need to adhere to whilst on the school trip. The teacher will ensure that all students are aware of what these measures are before entering any venues.

TRAVEL INSURANCEIf you have any medical concerns that may impact on your child's ability to travel, please refer to our medical/travel insurance guidelines on the following link <https://highcliffe.school/I/TravellInsurance>

Signature:

Print name:

Date: