Letters/SunriseBushcraftOct2023/KGI/ERS



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Headteacher - Patrick Earnshaw

October 2023

Dear Parent/Guardian,

As part of our pastoral support, we like to give students the opportunity to learn in a variety of settings and environments. We would therefore like to give your child the opportunity to attend 2 single day sessions held at Sunrise Bushcraft, focusing on self-regulation strategies.

Sunrise Bushcraft are a provider of education and training who work in partnership with Hampshire and Dorset County councils to offer bespoke days specifically designed to be of benefit to children with a wide spectrum of educational or emotional needs.

Their website is https://www.sunrisebushcraft.com/

These sessions will be held on two separate days:

- Monday 30th October
- Monday 6th November

Students will need to come into school in clothing suitable for being outdoors, with sensible shoes that they don't mind getting dirty, and enough layers to be outside for the day. They will also need to bring a packed lunch and water bottle.

In line with the school rules, students will not be permitted to use their phones during the day but can carry them in their bags as required.

Transport will be provided from school; student will need to register in their tutor base as normal and then meet in reception at 8.45am. Students will be back in time for the end of the school day.

If you have any questions or would like to discuss this with me further, please don't hesitate to contact either myself or Mr Amey (Pastoral Lead).

Kind regards,

Mrs Guerrini **SENCO**















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: SUNRISE BUSHCRAFT

Additional information: MONDAY 30TH OCTOBER & MONDAY 6TH NOVEMBER

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'S MEDICAL INFORMATION Please provide detail of all medical conditions and illnesses and any treatments required to maintain health. This information helps us to keep your child 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	
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If the answer to any of these questions is YES, please give details:

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	YES / NO		
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.	·		
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 INSURANCE

If 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/l/TravelInsurance

Signature:	Print name:	Date:
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