



Wedmore First School Academy

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14th September 2018

Dear Parents/ Carers,

**Visit to Nothe Fort
Monday 22nd October 2018 & Thursday 25th October 2018**

As part of our World War II topic we will be having an enrichment week of World War One and Two activities. One of the days will be a visit to **Nothe Fort in Weymouth**. The other days will be a variety of activities at school. The children will need to be dressed in their World War Two costumes on the day they are going on their trip.

Nothe Fort trip – Monday 22nd October: Hedgehogs and Skylark year 3s

Nothe Fort trip – Thursday 25th October: Owls and Skylarks year 4s

SCHOOL BASED ACTIVITY DAYS: On the activity days in school, your child will arrive and leave at normal time. We are planning a programme of activities for the children to enjoy for the day they are not on the visit.

NOTHE FORT TRIP DAY: Our trip will include a programme of activities based on the life of an evacuee during WWII, including, lessons in the school room, visiting a 1940's kitchen, receiving air raid precaution instructions and touring the fort. **The coach will leave school at 7:40 am. On the day of your trip the children will need to be in school by 7.20am to facilitate a prompt departure; we will not be able to wait for any children who arrive late due to the length of journey and timings involved during the day.** In order to maximise the educational value of the visit we will not be returning to school until 5.00- 5.15pm. Therefore please make arrangements for your child to be collected from school at this time. If we are significantly delayed for any reason, you will be contacted.

Sturdy footwear such as trainers is also advised. Please provide your child with a packed lunch and drinks. If you are able to provide the lunch in a brown paper bag or tin appropriate to the era, that would be fantastic but it is not absolutely necessary! The children will not have to carry their lunch around with them through the day. Please name their lunch container clearly.

To cover the cost of the trip a voluntary contribution of £14.50 is requested. This is slightly higher than most educational trips due to the length of journey and subsequent coach costs, however we feel that the educational experience that the children will have at Nothe Fort is worth it. Please note that if insufficient contributions are received, the visit may have to be cancelled. **Payment, signed consent forms and medical forms must be returned to the school office by 5th October please.** No spending money is required.

Due to the length of journey (approx 2 hours) please ensure those children who are vulnerable to travel sickness have their medication in the morning and provide us with any further medication needed for the return journey. If your child is prone to this, please detail this information on the medical form so that we are aware in advance of the day.

We are looking forward to an exciting day for the children who are enjoying this stimulating topic.

Yours sincerely

Mr Wookey, Mrs Davies and Miss Low



**Wessex
Learning Trust**
We Learn Together!

A 'Wessex Learning Trust' Academy. Registered address: Station Road, Cheddar, Somerset, BS27 3AQ.
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Visit to Nothe Fort
Monday 22nd October 2018 & Thursday 25th October 2018

Child's Name..... Class.....

I have made my payment of £14.50 online via my Tucasi Online account.
If you require log on details please contact the school office.

As parent/guardian of the above named child, I have read, fully understood and I am satisfied with the details supplied about the above mentioned activity and agree to my son/daughter taking part in it. I know of no medical reason why he/she should not participate.

I am aware that the Academy only provides cover against proved or agreed negligence by the Academy and its employees and that I should consider making my own insurance arrangements for personal accident cover for my son/daughter for school activities in the U.K.

Signed Date

PLEASE RETURN THE CONSENT FORM TO THE SCHOOL OFFICE, EVEN IF YOU TICK THE CONSENT BOX ONLINE

EV5: PARENT/CARER CONSENT FORM FOR AN EXTERNAL VISIT

This two-page form should be read with the accompanying information/letter about the visit.

All sections must be completed.

Please answer with details or by stating N/A (Not Applicable) for the medical and dietary sections.

This information is requested to enable staff to be fully informed and act in the best interest of all participants.



GENERAL INFORMATION

Name of Son/Daughter: _____ Date of Birth: _____

School/Establishment: WEDMORE FIRST SCHOOL ACADEMY Date(s) of visit: 22/10/2018 OR 25/10/2018

Proposed Visit: NOTHE FORT Venue: NOTHE FORT, WEYMOUTH

MEDICAL INFORMATION

1. If your child has any condition or impairment that may require specific management, medical treatment and/or medication during the outlined activity/trip/visit please give brief details. Please include details of any night-time issues.:

2. If your son/daughter has any allergies or is allergic to any medication please supply details:

3. If your child has had any recent illness, accident or injury which staff should be aware of please supply details:

4. Date of your child's last anti-tetanus injection: _____

5. Family doctor: _____ Telephone: _____

Address: _____

If you feel that further detail or a discussion is required regarding any of the information that you have supplied please contact Mr Wookey, Mrs Davies or Miss Low prior to the departure date.

EMERGENCY CONTACT

Name of Parent/Guardian: _____

Address: _____

Emergency telephone: Daytime: _____ Evening: _____ Mobile: _____

Alternative emergency contact should parents/guardians not be available:

Name: _____ Relationship to child: _____

Address: _____

_____ Telephone: _____ Mobile: _____

PLEASE TURN OVER

EV5: PARENT/CARER CONSENT FORM FOR AN EXTERNAL VISIT *(cont'd)*

DIETARY INFORMATION (residential visits only)

If your child has any essential dietary requirements please supply details:

DECLARATION

I understand that all reasonable care will be taken of my child during the visit/activity and that he/she will be under an obligation to follow all directions and instructions given and observe all rules and regulations Governing the visit/activity.

I understand that if my child seriously misbehaves or is a cause of danger to him/herself or to others, then he/she may be sent home early from the visit/activity. In such a situation there will be no obligation on the school/establishment to refund any money.

I understand the extent and limitations of the insurance cover provided and whilst the establishment staff in charge of the group will take all reasonable care, they cannot necessarily be held responsible for any loss or damage suffered by my son/daughter during the visit. I understand that all visits are covered by public liability insurance and I can contact the school/establishment if I require further details.

I agree to my son/daughter receiving medical care if required. This would include first aid and any emergency dental, medical or surgical treatment as considered necessary by the medical authorities present in the best interest of your son/daughter. Please tick here if you do not agree

I give permission for my child to be photographed/film during this visit/activity (for possible use in displays/presentations, marketing materials and press releases). Please tick here if you do not agree

Having been informed through the details supplied. I consent to my son/daughter taking part in this activity/trip/visit and, This includes consent for him/her to take part in any or all of the activities described.

Full name of parent or carer (print please): _____

Signed: _____ Date: _____

EXPLANATORY NOTES - This form serves several important functions.

1. It confirms your knowledge of and your agreement to your child's participation in the planned visit.
2. It gives the supervising staff immediate information on how to contact you in an emergency.
3. It contains information about your child together with your consent to medical treatment if required.
4. It advises you that the Academy will NOT necessarily be legally liable for every type of loss suffered by a child whilst on a visit.
5. The completion and returning of this form is essential to enable your child to participate in the visit/activity.
6. If you wish to discuss any of the contents of this form please contact the child's Headteacher/Senior Manager.
7. **Data Protection.** *The data collected by establishments from Somerset Local Authority, and Somerset County Council as the data controller, will fulfil its data protection obligations by treating all personal data, held manually and on computerised administrative systems with due care and confidentiality. Personal data will only be disclosed in accordance with the Data Protection Act 1998, and the purposes registered by Somerset County Council. Data collected is used for registration and monitoring purposes, and emergency contact information.*