DRIFFIELD NORTHFIELD INFANT SCHOOL

Tel: 257487 28th April 2022

Dear Parents,

On Wednesday 25th May the Y1 children will be visiting Dalby Forest as part of our great outdoors topic. The cost of the trip is £10.00.

The two coaches are fitted with seat belts and hired from Esk Valley. We will leave school at 9.00 a.m. and return at 3.00p.m. in time for regular pick up of 3.15pm.

There will be 60 Y1 children taking part accompanied by the appropriate number of adults. As in all school activities the children should respect the authority of <u>all</u> the adult helpers and be prepared to do as they are told.

The children will be provided with a packed lunch from school. If you prefer to provide a packed lunch from home please complete and return the slip below by Monday 9th May. The children will need to wear their school sweatshirt, a waterproof coat, sun hat and sensible footwear as we will be walking through the forest. Sunscreen should be applied before school.

The trip has the approval of the full governing body and is covered by the ERYC Voyager Personal Accident Insurance Scheme. The staff will carry a mobile phone at all times.

If your child suffers from travel sickness or has any specific medical needs please let us know so that appropriate arrangements can be made.

If you wish your child to take part in this trip please complete the parental consent form and return to school with the payment by Monday 16^{th} May. Please take advantage of our savings scheme to pay weekly – call at the office for more details.

If you have any questions on our educational visit please do not hesitate to see the visit organisers Miss. Dean and Miss. Tate.

Driffield Northfield Infant School - Year 1



I will be providing my child	Class
with a packed lunch from home.	
Signed	Date
Jigiieu	Date

DRIFFIELD NORTHFIELD INFANT SCHOOL

Educational Visit Parental Consent Form

1.	Detai	ils of Journey
Visit	to	Dalby Forest
Date		Wednesday 25 th May 2022
Time	S	Leaving at 9.00 a.m. returning at 3.00p.m.
havin	g read	my childtaking part in the above mentioned visit and, the information sheet, agree to their participation to any or all of the activities I acknowledge the need for obedience and responsible behaviour on their part.
2. Medical Information		cal Information
	a)	Does your child suffer from any conditions requiring medical treatment, including medication? YES/NO
		If YES, please give brief details
	b)	To the best of your knowledge, has your child been in contact with any contagious or infectious diseases or suffered from anything in the last three months that may be or become contagious or infectious? YES/NO
		If YES, please give brief details
	c)	Does your child have any allergies - for example to medication or specific foods? YES/NO
		If YES, please specify

d) Has your child received a tetanus injection in the last five years? YES/NO

I undertake to inform the visit organiser as soon as possible of any change in the medical circumstances between the date signed and commencement of the journey
Declaration
In an emergency I agree to my child receiving medical treatment including anaesthetic as considered necessary by the medical authorities present. I understand the extent and limitations of the insurance cover provided.
I may be contacted by telephone on the following numbers:
Name
1 st Priority number:
Alternative contact: Name
1st Priority number:
Name of Family Doctor
Telephone number:
I understand the cost of the visit will be $\underline{\textbf{£10}}$
To be returned and paid in full by - Monday 16th May
Signature of parent/guardian
Date

Please outline any special dietary requirements of your child.

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3.