



Mr. Gary Spracklen - Headteacher (@Nelkcarps)



Maiden Castle Road, Dorchester, Dorset. DT1 2HH



01305 257120



office@princeofwales.dorset.sch.uk



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Wednesday 31st January 2018

Dear Parents

Hooke Court Residential

Details of our visit to Hooke Court (Monday 23rd April – Wednesday 25th April) now need to be finalised. We can now confirm that the cost for the trip is £160.00. Please see below for the payment plan:

Initial deposit = £40 was due by Friday 1st December 2017

First instalment of: £60.00 payable by Friday 2nd March 2018

Second Instalment of: £60.00 payable by Monday 16th April 2018

I appreciate the cost of this residential visit for Year 4, I hope that spreading the cost over the coming months as above will help. Should the above amounts be difficult please contact the school office who will be happy to arrange a personal payment plan with you.

I am very keen for all the children to go and I would ask anyone who might be worried about the cost, or anything else, to contact me to discuss in confidence.

Enclosed with this letter is a County Parental Consent Form for a residential visit which you will need to complete and return to us as soon as possible. It is very important that we have this completed document to take with us. Also enclosed is a list of items which each child will need to bring with them.

Mrs Johnson, Mr Gibson will be the teaching staff (I will also be planning to visit throughout the residential). The Teaching support team from Year 4 will be accompanying the class plus one other members of staff to be confirmed at this point. I will share this information with you at the Information session. We will have a high level of supervision for the children. The team of staff then supports the professionals who lead the sessions at Hooke Court.

There will be a parent's information evening held on Thursday 1st February at 3.30pm in the Year 4 base when full details of the activities planned will be shared with you.

Yours sincerely

Mr Spracklen - Headteacher



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DORSET COUNTY COUNCIL

PARENTAL CONSENT FORM FOR A RESIDENTIAL VISIT

The Prince of Wales School

YEAR 4 - VISIT TO HOOKE COURT 23rd - 25th April 2018

Name of child

I consent to my child taking part in the visit and the activities involved. (You will receive details of the activities on the information evening).

Although my child is in good health, I should like you to know the following: *(Please state, in confidence, any health or other matter concerning your child about which you would like the staff to know. In your child's interests it is vitally important that the organising staff know whether he or she suffers from any illness which may affect his or her participation. **Please include inhaler information.***

Please also include any special dietary requirements that your child may have. If necessary please supply the party leader with any medicines which need to be administered, together with relevant instructions.) Closer to the time of the visit you will be asked to fill in a medicine consent form.

I consent to my child receiving emergency medical treatment, which might involve the use of anaesthetics and blood transfusions. I understand however, that the party leaders will do their utmost to contact me prior to any such decision.

Is your son/daughter allergic to any medicine? If YES, please specify:

.....

When did your son/daughter last have a tetanus injection?

.....

Doctor's name and telephone number

Child's NHS card number

Home address and telephone number

Tel No:

continued overleaf....



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Emergency contact name

(if parent cannot be contacted)

Tel No:

I further consent to my child travelling by any form of public transport and/or in a motor vehicle driven by a suitably qualified adult member of the party.

I understand and accept that school journeys and educational visits are an extension of school activities and that, as such, arrangements for care, supervision and discipline will be in accordance with those policies laid down in the school prospectus and evidenced in the current practice at the school. I also understand and accept that the school, through its party leaders, will at all times take reasonable care of my child. Neither the County Council, the school, nor their representatives can be held liable for any loss of personal effects or money.

The school has taken out travel insurance for this school visit, full details are available from the school office.

I agree to reinforce the need for my child to follow the school's code of behaviour.

Signed

(Parent/Guardian)

Date



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