

JST/dgr

1st July 2021

Parent/Carer of «Forename» «Surname» «Reg»

Dear Parent/Carer

Re: Year 8 Trip to Southend-on-Sea

At All Saints Academy, we are committed to our vision of Living Well Together with Dignity, Faith and Hope. We offer a wide range of visits, trips and activities because we know that our students become more dignified through increased life experiences and their hope and aspirations for their futures are increased through broadening their horizons.

I am pleased to advise you that your son/daughter has been invited to attend a reward visit to Southend-on-Sea on Friday 9th July 2021. Students will be travelling to Southend-on-Sea by coach and will be leaving the Academy at 8.15am to arrive at Southend-on-Sea at approximately 9.45am, depending on traffic. Students will leave Southend-on-Sea at 2.00pm to arrive back at the Academy for around 4.00pm. Students must arrive at the Academy no later than 8.00am as we will be unable to delay the departure of the coach for anyone who is late.

Students will be allowed to explore Southend-on-Sea in groups, within specific boundaries set by Academy staff. Students will also be given a wristband to access the rides at the Adventureland theme park. Please indicate your consent for a wristband on the attached form. Students will have to check in with staff several times during the day and there will be an emergency contact number for students to phone if they need assistance or help. As the weather can be unpredictable I would advise students to dress appropriately for the weather, this might include bringing a rain jacket or sun cream.

We also request that students are mindful of their style of dress, eg no crop tops or very short skirts/shorts, as, even though they are not wearing uniform, students are still representing the Academy. Students who do not meet these expectations will be sent home to change or may be removed from the trip. Students will need to bring a packed lunch or money to purchase lunch. Students entitled to free school meals may order a packed lunch from the canteen, if they wish, and this can be done on the attached consent form.

We are pleased to be able to offer this trip at no cost to families. If you are happy for your son/daughter to take part in this visit, please complete the attached consent form and return to Student Reception no later than Monday 5th July 2021. As we are returning to the Academy after the end of the school day, please indicate how your son/daughter will be getting home. Please be aware that participation in this trip is dependent on students maintaining their high standards of behaviour and attendance up until the date of the trip.

If you would like any further information, please do not hesitate to contact us at the Academy on 01582 619700.

Yours faithfully



Jamie Stevens
Head of Year 8



All Saints Academy, Houghton Road, Dunstable LU5 5AB

01582 619700

www.allsaintsacademydunstable.org

Executive Principal: Liz Furber

Registered Company No: 06853140



Please complete and return no later than Monday 5th July 2021

Re: Year 8 Trip to Southend-on-Sea

I give permission for _____ (student name) to take part in the trip to Southend on Friday 9th July 2021.

My child is entitled to free school meals and
I would like the canteen to provide a packed lunch
My child will bring a packed lunch from home

Students will be given wristbands to access rides at the Adventureland theme park
YES my child **can** be given a wristband for the rides at Adventureland
NO my child **cannot** be given a wristband for the rides at Adventureland

As we will be arriving back at the Academy after the end of the school day, please state if you will be collecting your child from the Academy or if you are happy for them to make their own way home.
I give consent for my child to make their own way home upon returning from the visit
I will be collecting my child from the Academy

Having read the enclosed trip letter, I agree to my child taking part in any or all of the activities described.

Before signing this Consent Form, it is important that you understand that:

1. Whilst the supervisory adults in charge of the group will take all reasonable care of your child, they cannot be held liable in respect of loss or damage to property or injury suffered by your child as a result of the educational visit/journey, unless such loss, damage or injury results from the negligence of an employee or official volunteer of All Saints Academy Dunstable.
2. You read and understand the extent and limitations of the insurance cover provided, if applicable.

I agree to my child receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.

EMERGENCY CONTACT DETAILS (please include name of contact)

Name of contact: _____ Relationship to student: _____

Home: _____ Work: _____ Mobile: _____

Please advise of any medical condition(s)/allergies/dietary requirements of which we should be aware:

Is the student taking any medication? YES / NO (delete as appropriate)

If yes, please name the medication _____

What dosage is taken and how often? _____

Do staff members have permission to administer the above medication where necessary? YES / NO (delete as appropriate)

Name of your child's doctor: _____ Doctor's telephone number: _____

Signed _____ (Parent/Carer) Date: _____