

SKC/Residential Visits/Condover 2016

February 2016

Dear Parents of Children attending JCA Condover Hall 21st – 22nd March 2016

Please find attached a Parent Consent Form which needs to be completed and returned to school by Friday 5th February 2016 – child's NHS number must be completed. If we do not receive this form your child will not be able to attend this trip. If you have any money outstanding this **MUST** be paid by Friday 5th February 2015. If we do not receive payment your child's place may be cancelled. Please speak to Ms Cope immediately if you have any concerns over this.

Also attached is a suggested kit list for the trip.

We suggest that you fit all of the equipment that your child is bringing in one bag, as they will have to carry their own bag. **Please DO NOT send an enormous case as your child will be carrying their OWN luggage.** We suggest that your child packs the case with you so that they know what is in their case. Please ensure that all clothing is labelled.

Please note:

No electrical equipment to be taken away.

No mobile phones allowed.

Children can bring a maximum of £10 spending money (please ensure that this is in coins and NOT a note as we will be unable to provide change). Please label purse/wallet clearly, and hand to one of the Teachers On Monday 21st March.

The coach will leave school at approximately 12 midday on Monday 21st March and will return on Tuesday 22nd March at approximately 3.00pm.

We will text message parents to confirm arrival at Condover Hall and send out regular twitter updates. If there are any delays on the return journey we will notify you again by text with any information we have therefore please ensure all mobile numbers held at school are correct.

If you have any further queries please contact the school office.

Yours faithfully

Ms S Cope

School Business Manager

Office: Residential Visits:Condover Hall

ISLE OF WIGHT 2014 - KIT LIST

Suggestions for contents of hand luggage for travelling on Monday

- Small pack tissues
- Bottle of water
- 1 disposable camera (clearly labelled with name)

Suggestions for contents of case

CLOTHING	TICK
Take plenty of clothing in case of wet weather. Clothing should be old (Trust me, they get FILTHY!)	
Nightwear	
Underwear	
Socks, including over ankle length	
2 or more fleeces/sweatshirts	
2 sleeved T-shirts	
1 Long sleeve t-shirt(some activities require long sleeves regardless of the weather)	
2 pairs of old trousers (not jeans) 2 for activities, 1 for evening wear	
2 pairs of shorts	
2 pairs of trainers – 1 pair for wet activities (NB. You must have an old pair that you can wear in the sea.) 1 pair of Substantial shoes/boots for outdoors	
1 pair of shoes or trainers for indoors	
Waterproof jacket	
Baseball cap/hat / Gloves	
Swimwear (we are not swimming but for wearing under wetsuits)	N/A
1 set of Disco clothes	
OTHER ESSENTIALS	
Wash bag (soap, toothbrush, hairbrush, toothpaste etc)	
Towel	
Torch & batteries (not essential)	
Plastic bottle for drinks and a small rucksack to carry it in, they need these all day	
Sunscreen (summer)	
Small bag/rucksack for carrying water bottle in	
Labelled plastic bags for wet items & dirty laundry	
Please note: <ul style="list-style-type: none"> - children need to bring practical activity clothing - non-fashion items. - No stringy vests/tops in case of really hot weather and safety issues relating to these items getting caught. 	
Other items you may wish to list:	

**Parent consent form
(to be retained by school)
IMPORTANT INFORMATION
Emergency details**

CHILD'S FULL NAME: _____

CHILD'S NHS NUMBER: _____

FULL POSTAL ADDRESS: _____

DATE OF BIRTH: _____

PLACE OF BIRTH: _____

PARENT/GUARDIAN NAMES: _____

TELEPHONE NUMBER: DAY _____

EVENING _____

MOBILE _____

Important Medical and Dietary Details

NAME OF DOCTOR: _____

DOCTORS TELEPHONE NUMBER: _____

BEHAVIOUR OR LEARNING DIFFICULTIES:

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VEGETARIAN **YES/NO*** (***DELETE AS APPLICABLE**)

WATER CONFIDENT **YES/NO*** **IF YES CAN SWIMM 25M** **YES/NO**

DIETRY REQUIREMENTS/ALLERGIES:

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MEDICAL CONDITIONS/ALLERGIES:

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Declaration

I believe that the information provided above is correct and will notify the course organiser of any changes as soon as possible. I agree to my child receiving medication as instructed and to any emergency dental, medical or surgical treatment as considered necessary by the medical authorities present

Signature of Parent/Guardian _____ **Date** _____

The personal information supplied will only be used to allow Condover Hall employees, agents, subcontractors and suppliers to provide the promised service to JCA's normal high standard.