

EB/JMO

February 2010

TO PARENTS OF LOWER SENIOR GEOGRAPHY STUDENTS

Dear Parents,

As part of their study programme, it is normal for Geography students to carry out fieldwork. This year the course will take place on the east coast centring on Robin Hood's Bay from the morning of Friday **7th May** to 4.00pm on Saturday **8th May 2010**. The total cost of the visit, including coach transport and one night's accommodation at Boggle Hole Youth Hostel, will be approximately £45.00 and further details will follow nearer the time.

In the meantime, however, please complete the consent form below and medical form enclosed and return them to me before **5th March**. If your son or daughter has any special dietary requirements please would you make sure that these are stated on the medical form.

As the controlled assessment based on the field trip is worth 15% of the GCSE, attendance is extremely important, however if you do not wish your son or daughter to take part, please write to Graham Ralph as soon as possible so that alternative arrangements can be considered.

Yours sincerely,

ELIZABETH BROWN
Head of Geography

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**Lower Senior Geography Field trip
Friday 7th to Saturday 8th May 2010**

Name of Pupil: _____ Form : _____

I would like my son/daughter to be included in the field trip to the **Robin Hood's Bay**, from **7th to 8th May 2010** inclusive.

Please add the cost of approximately £45 to the Summer term school bill

I enclose a cheque payable to Bootham School in the sum of £45

(Only the final amount will be deducted. Any excess will be repaid and you will be informed in the unlikely event of any increase in this figure).

Signed: _____ Date: _____

PLEASE RETURN FOR THE ATTENTION OF LIZ BROWN BEFORE 5th March 2010

**BOOTHAM SCHOOL
PARENTAL CONSENT FORM FOR A SCHOOL VISIT**

For completion by staff:

Name of Trip: **Lower Senior field trip to the East Coast**

Educational objectives: **Geography Fieldwork as part of GCSE course work**

Summary details of visit: **Boggle Hole, Robin Hood's Bay**

Date and time of departure: **Friday 7th May 2010 at 09.00 approx.**

Date and time of return: **Saturday 8th May 2010 at 16.00 approx.**

(unless specified Bootham School will be the point of departure and return).

For completion by parents

Pupil's Name: _____ Form/Tutor Group: _____ Date of Birth: _____

Please give details of any medical conditions and any medication or medical treatment that may be required or should be avoided. Please include any possible allergic reactions	
Please give details of any prescription drugs in the possession of your child.	
Please give details of any special dietary requirements.	
Non-prescription pain-killer normally used	PARACETAMOL (if other please state)
To the best of your knowledge has your son/daughter been in contact with any contagious or infectious diseases or suffered any thing in the last four weeks that may be contagious or infectious? If yes please give details.	
When did your son or daughter last have a tetanus injection?	

Declaration

I agree to my son/daughter receiving medication as instructed in an emergency and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion as considered necessary by the medical authorities consulted.

I will inform the Group Leader or Head Teacher of any changes in the medical or other circumstances of my child.

I understand the extent and limitation of the insurance cover provided (for overseas trips only).

I agree to my son/daughter taking part in this visit and the activities described.

Signed: _____

Date: _____

Print name in capitals: _____

Contact names and telephone numbers

Home Address/Tel No			
Father: Work Tel No/ Mobile No		Mother: Work Tel No/ Mobile No	
Emergency Contact: Name/Address/Tel No			
Family Doctor: Name/Address/Tel No			

A copy of this information should be taken by the group leader on the visit and a copy retained by the school contact person.