DRIFFIELD NORTHFIELD INFANT SCHOOL



Dear Parents and Carers,

As part of our learning in Science, about Living things and their habitats in Science **Dragonflies** will be visiting Bempton Cliffs RSPB site and the Living Seas Centre at Flamborough on Wednesday 22nd May.

The school will be subsidising the trip, so the cost of the visit will be £10.00.

The coach is fitted with seat belts and hired from Esk Valley and will leave school at 9.00 a.m. and return at approximately 3 p.m.

There will be 30 Y2 children taking part accompanied by the appropriate number of adults. As in all school activities the children should respect the authority of all 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 your own packed lunch please complete and return the slip below by Wednesday 24th April. The children will need their school sweatshirt, wellingtons, a waterproof coat and a sun hat. If you would like your child to wear sun protection cream please apply before coming to 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.

To enable your child to take part in this trip please complete the parental consent form attached and **return to** school by Monday 13th May.

If you have any questions about our educational visit please do not hesitate to see the visit organiser Mrs. Baarda.

Driffield Northfield Infant School - Year 2

I will be providing my childlunch from home.	C	lass	with a packed
Signed	Date		

To be returned by Wednesday 24th April, please.

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Dragonflies Educational Visit Parental Consent Form

1. Details of Journey

Visit t	о	Bempton Cliffs RSPB and Flamborough Living Seas Centre	
Date		Wednesday 22 nd May 2024	
Times		Leaving at 9.00 a.m. returning approximately 3 p.m.	
having	read	my childnemstaking 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			
	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		
e)	Please outline any special dietary requirements of your child.		
	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.		
Decla	ration		
consid	emergency I agree to my child receiving medical treatment including anaesthetic, as dered necessary by the medical authorities present. Erstand the extent and limitations of the insurance cover provided.		
I may	be contacted by telephone on the following numbers:		
Name			
1 st Pri	ority number: 2 nd Priority number:		
Alter	native contact: Name		
1st Pr	riority number:		
Name	of Family Doctor		
Telep	hone number:		
I und	erstand the cost of the visit will be £10		
To be	paid in full by - Monday 13 th May		
Signa	ture of parent/guardian		
Date			

3.