

April 2018

Dear Parent/Carer

As part of the GCSE Geography course, students are required to participate in fieldwork. The work carried out on this day will allow them to access Paper 3, which is based on geographical applications and fieldwork. We will be leaving school at 8.45am prompt and will return by approximately 4.00pm.

The fieldwork will take place on either Tuesday 12 June 2018 or Friday 15 June 2018. This will be the physical fieldwork day where they will be investigating the changes downstream at Edale in north Derbyshire. They will be working in small groups under direct supervision from Heanor Gate staff and will be carrying out various tasks at different stages along the river. Students will find out the day which they are required to attend in due course.

Students will need to ensure that they wear sensible clothing, including waterproof coats and trousers and wellington boots, as they will have to stand in the river in order to take measurements. They will need to bring spare clothes and a packed lunch as there will be nowhere to buy food and drinks whilst we are out. **Please be aware that we have students who may be participating in this trip who have a serious nut allergy. Please avoid giving your son/daughter bagged nuts or products with a nut content, as even the smell can cause these students anxiety.** If your child is entitled to free school meals and requires a packed lunch on the day, please tick the relevant box on the attached form.

As students will be working in an environment that is unfamiliar to them, we would expect that they work with respect for that environment; adhering to the guidance given to them by the staff in order to keep them safe and to allow them to achieve the best possible results from the day.

The cost of the trip is £10, to cover the cost of coach transport to and from Edale. Our preferred method of payment is via ParentPay. If you wish to pay by cheque please complete and return the attached Parental Consent Form and send it, together with your payment, to reception as soon as possible; ensuring your child's name and Tutor Group are written on the reverse. If you require a PayPoint barcode please contact the school as soon as possible.

Please do not hesitate to contact me or your child's geography teacher if you have any queries:-

[cmeakin@heanorgate.derbyshire.sch.uk](mailto:cmeakin@heanorgate.derbyshire.sch.uk)

[charris@heanorgate.derbyshire.sch.uk](mailto:charris@heanorgate.derbyshire.sch.uk)

[lunderhill@heanorgate.derbyshire.sch.uk](mailto:lunderhill@heanorgate.derbyshire.sch.uk)

[m.kirk@heanorgate.derbyshire.sch.uk](mailto:m.kirk@heanorgate.derbyshire.sch.uk)

Yours sincerely

Chantelle Meakin  
Geography Teacher



**HEANOR GATE SCIENCE COLLEGE  
TRIP CONSENT, CONTACT  
AND MEDICAL FORM**



Please complete and return to Student Reception  
**PLEASE COMPLETE ALL SECTIONS**

Student's name				RG	
Trip / Visit to	GCSE Geography trip to Edale, north Derbyshire				
Cost	£10.00				
Date(s) From	Tuesday 12 June 2018 or Friday 15 June 2018	Teacher in charge	Mrs C Meakin		
Times	8.45am-4.00pm approximately	My child is entitled to free school meals and requires a packed lunch for this trip ✓			

**Student Contact Details**

Home address			
Contact telephone numbers (for the duration of the visit / trip)			
Name		Home	
Mobile		Work	
Email			

<b>Alternative contact</b>	Relationship to student:		
Address			
Name		Home	
Mobile		Work	

**Medical Information**

Name of doctor		Tel no	
Address of surgery			

*Please delete as appropriate*

Does your child suffer with a medical condition that requires regular treatment?	<b>Yes</b> continue below	<b>No</b>
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My child suffers from (e.g. asthma) and has been prescribed the following medication			
	Name of medication	Dose	Frequency

NB: if your child is on a residential visit, please ensure you include information relevant to night-time needs

My child also uses the following over-the-counter medication	Name of medication	Dose	Frequency

My child has an allergy to the following	Allergic to	Type of reaction

*Please delete as appropriate*

I would like to discuss my child's medical condition with trip leader	YES NO
My child has an up to date tetanus injection	YES NO
I am willing for my child to be given "over-the-counter medication" by staff e.g. paracetamol, throat lozenges, insect bite antihistamine, travel sickness tablets and sun cream/aftersun if necessary	YES NO

**Any medication required should be given to the teacher in charge, clearly marked (in its prescription container if applicable) with name and full instructions for use.**

**Inhalers and "Epipens" may be kept by the student with spares given to the teacher in charge.**

I give authorisation for my child to keep an inhaler with them and use it as required <i>(Please delete as applicable)</i>	YES NO
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### **Dietary Information**

Does your child have any special dietary requirements e.g. vegetarian, kosher, allergies <i>(If Yes, please give details)</i>	YES NO

### **Additional Information**

Please include any additional information as required

<b>Photography/Video</b> - Please tick the box if you <b>DO NOT</b> give permission for your child to be photographed and/or videoed for use in any school publicity material including parent magazine and the school website.	
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### **Declaration by Parent/Carer (or student if over 18)**

1. I agree to my child attending this trip/visit/activity
2. I have read and completed this form and to the best of my knowledge the details given are true and accurate.
3. 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.
4. I will inform the teacher in charge as soon as possible of any changes in the medical or other details between now and the commencement of the visit/trip.

Signature		Date	
Print name			