

4<sup>th</sup> January 2023

Dear Parents & Carers

### Swallows - Kent's Cavern - Friday 24<sup>th</sup> February 2023

This half term, KS1 will be learning all about the Geopark in Torbay. To support this learning, we will be visiting Kent's Cavern where we will be exploring first hand the history of the rock formations and the Geography of the area.

Leading up to the trip, the children will be looking at aerial views of Torbay to analyse and understand why the Geopark has global significance. Later in the year, we will be comparing our Geopark with the Batur Geopark in Indonesia.

We will travel to Kent's Cavern by coach on Friday 24<sup>th</sup> February at 9am. Our coach will be returning to school in time for the normal collection time of 3:15pm.

To ensure we have the correct numbers in regard to admission prices, and for the payment of the coach, it is important that we have your permission slips returned no later than Friday 27<sup>th</sup> January.

To enable the trip to go ahead, we are asking for a voluntary contribution of **£9.60 per child** to cover the cost of the coach and entrance to the caverns. If we do not collect sufficient voluntary contributions, the visit may be unable to take place.

Please ensure that your child brings the following items with them:

- Sturdy comfortable shoes
- A water bottle
- A packed lunch (unless ordering a lunch from school)
- Warm weather gear (coat, hat, gloves etc.)

Please complete and return the slip below and the S0E3 attached. Payments can be made via the MCAS. Please complete the paperwork and return to the school office by **Friday 27<sup>th</sup> January**.

If you have any questions or would like any more information, please speak to the Key Stage 1 team or the school office.

Yours sincerely,

Mrs Eversfield  
Assistant Head of School



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## FLOURISHING FUTURES



**Dartington C of E Academy – Swallows – Kent's Cavern**

**24<sup>th</sup> February 2023**

Child's Name .....

Class .....

- I give permission for my child to attend the trip.
- I have paid £9.60 via the MCAS App.
- I have ordered a school packed lunch.
- My child will bring a packed lunch from home.
- If there is a small profit, which we do not anticipate, of less than £2 per child I am happy for this to remain in the school budget.



## FORM SOE3: PARENTAL CONSENT FOR OFF-SITE ACTIVITIES

### *DEAR PARENT OR GUARDIAN*

You have already received details about our forthcoming visit or activity. Please complete and return this form giving your consent for your child to take part in this activity.

**Dartington Primary School**

**Visit or activity** – Swallows Kent's Cavern Trip

**Dates and times** – Friday 24th February 2023

**Name of child**

**Date of birth**

**Special details** - any information about your child's health which may need special attention, but does not prevent them from taking part should be noted below. (For example; any allergies, any medication needed and the dosage, travel sickness, diabetes, asthma or epilepsy?)

**Has your child had any relevant recent illness?**

**Does your child have any specific dietary requirements?**

**Do you have any additional comments?**



**Swimming ability** (for water based activities) **NB There will be no water based activities**

Is your child able to swim 50 metres? YES / NO

Is your child water confident for the proposed activity? YES / NO

1. I would like my child to take part in this visit or activity and having read the information provided agree to him/her taking part in the activities described.
2. I consent to any emergency medical treatment required by my child during the course of the visit.
3. I confirm that my child is in good health and I consider him/her fit to participate.
4. I am happy for my personal contact details to be given to the facilitator and used in an emergency outside of the School office hours.

Signature of parent or guardian ..... Date .....

**Name of parent or guardian** .....

**Address** .....

**Telephone number** .....

**Mobile:**..... **Work:** .....

**Name of family doctor**

**Approximate date of last tetanus injection:**