



Midhurst Rother College

The best in everyone™

Part of United Learning

1 April 2019

Dear Parent/Carer

Geography Fieldwork

On Wednesday 3 April 2019, we are proposing to take Y13 for one day's fieldwork. This will support their studies and provide real experience of key topics being studied.

The fieldwork will consist of three key areas, as listed below. In the morning we will spend time in Dorking and the Surrey Hills before travelling to Guildford for the afternoon.

1. Urban Rebranding – Dorking – Place Check, Shopping Quality and Street Appearance, Pedestrian Counts, Land Use Survey.
2. Farm Diversification in the Surrey Hills. (Denbies Vineyard) Field Sketches, Sustainability Analysis, record services provided.
3. Guildford – Flood Risk Investigation, Urban Rebranding Strategy (Friary Street)

Students will be transported by College minibus and will depart at 8.30am, returning for 3.30pm

There is no cost to students for the visit.

Students will need to be appropriately dressed for the outdoors and will need to bring either:
food /packed lunches or money to buy something to eat.

Due to the short notice, forms must be completed and returned **tomorrow**. Please either print the attached consent form and hand to Mrs Shadbolt, or email the form to lisa.shadbolt@mrc-academy.org

Yours sincerely

Mr John Robinson
Teacher of Geography



Trip to:	Dorking, Denbies Vineyard and Guildford
From (date/time):	Wednesday 3 April, 8.30
Until (date/time):	Wednesday 3 April, 3.30
Cost	Nil
Party leader/department	Mr John Robinson, Subject Leader of Geography

CONTACT INFORMATION		DOCTOR'S DETAILS	
Student name		Name of doctor	
Date of birth		Doctor's address	
Student mobile no			
Full home address		Doctor's telephone number	
Emergency contact numbers during trip			

MEDICAL INFORMATION/CONSENT– please answer the questions and sign below:		
Has your son/daughter had any of the following:	Y/N	If the answer to any of these questions is yes please give details(or attach on a separate sheet)
Asthma or bronchitis?	Y/N	
Heart Condition?	Y/N	
Fits/fainting/blackouts?	Y/N	
Severe headaches?	Y/N	
Diabetes?	Y/N	
Allergies to any medications?	Y/N	
Any other allergies?	Y/N	
Recent contact with contagious diseases/infections?	Y/N	
Other illness or disability including any current medical treatment?	Y/N	
Specific medical advice to follow in emergencies?	Y/N	
Special dietary requirements?	Y/N	
Prone to travel sickness?	Y/N	
Has your child been vaccinated against tetanus in the last 10 years?	Y/N	
Is your child currently having any medical treatment/taking medication (please provide full details)	Y/N	
I consent to any emergency medical treatment necessary during the course of the visit		SIGNED: Parent/Carer



PARENT'S CONSENT AND MEDICAL FORM SHORT TRIPS

PARENTAL AGREEMENT – please read and sign below

Transport

I consent to the pupil travelling by any form of public transport and/or in a motor vehicle driven by the party leader or any other responsible adult member of the party who is authorized by law and duly insured to drive.

Accident/illness

I consent to the pupil receiving medication as instructed and any emergency dental, medical or surgical treatment, including inoculations, general or local anaesthetic, surgery or blood transfusion, as considered necessary by the medical authorities present.

Remotely supervised time (senior College only)

I consent to the pupil having remotely supervised time in the daytime in a group of pupils with the prior permission of the party leader

Personal effects of the pupil

I acknowledge that the pupil will be responsible for the safety of his/her own money and personal effects. I will not hold the College responsible for losses unless caused by the negligence of the College.

Insurance

I understand the extent and limitations of the insurance cover provided, and know of no information that may affect the insurance.

Signature of parents/guardians

I, the undersigned who have parental responsibility for the above named pupil have completed the information requested above and overleaf. I have read and understood and I consent to the matters set out above and overleaf.

I agree to inform the College as soon as possible of any changes in the medical or other circumstances between now and the commencement of any journey.

SIGNED:

(Parent/Carer)

Student agreement

I the above named student agree to observe the code of conduct for visits. I will do my best to ensure the safety of myself and other members of any party. I will at all times act with courtesy and consideration for others and do my best to uphold the good name of the college.

SIGNED:

(Student)

Midhurst Rother College will collect and hold information on this form for administrative purposes only. We hold this information for no longer than is necessary, usually the duration of the trip.

We confirm that once the trip has been completed this document will be destroyed securely, unless there was an incident during the trip.

The data controller for personal information held by the Group Academies is United Learning Trust (ULT). ULT is registered with the ICO under registration number Z7415170. The Company secretary, Steve Whiffen, is responsible for ensuring that the Group complies with the Data Protection Law. He can be contacted on company.secretary@unitedlearning.org.uk or 01832 864538.

The College's full privacy notice is accessible via the College's website www.mrc-academy.org