

West Sussex County Council
DURRINGTON INFANT AND DURRINGTON JUNIOR SCHOOL FEDERATION
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Co-Headteachers: Mrs S Ensor B.Ed & Mrs Z Wilby MA



17th January 2019

Dear Parents/Carers of Reception Class

We are planning an exciting trip for our Reception children to Plumpton College Farm on **Wednesday 13th March 2019**.

The day has been coordinated to fall on a 'Lambing day' at the farm which will include seeing and possibly feeding the lambs. We will visit all the other farm animals and look at farm machinery, which will allow the children first-hand experience of a working farm atmosphere.

The children will need to arrive promptly, at school as usual, by 8.45am, and the coach will return within plenty of time for the usual home time at 3.15pm. They should wear their school jumper with tracksuit bottoms or joggers, a pair of wellington boots and also bring a coat or waterproof jacket.

Children will require a packed lunch and two drinks (one for lunch and one for break time). Please do not bring glass bottles or fizzy drinks. It would be helpful if the children could bring their lunch and drinks in named, disposable containers/bags which can be thrown away when finished. If you would like a school packed lunch, please indicate this on the medical form.

It will not be possible for trips like this to take place without a financial contribution from families. The whole cost will be **£13.70** per child. We have organised this payment to be paid in full, or in two instalments that hopefully coincide with two paydays. We ask for a deposit of **£8.70 by Friday 1st February** and the remaining amount of **£5 by Friday 1st March**. Please place exact cash or a cheque payable to **Durrington Infant School**, in a named envelope with your child's name, class and what it is for on the front. Unfortunately, where there are not enough voluntary contributions to make this activity possible, and there is no way to make up the shortfall, the activity would have to be cancelled.

If the cost of the trip is an issue, please speak to Mrs Hankin in complete confidence.

Please can you complete the attached medical form and return it with your payment as soon as possible and by **1st February** at the latest.

Yours sincerely

D. Bourne.

Mrs D Bourne EYFS Phase Leader



Need Help with this letter? Need more information? Please contact the School Office.



Visit to **Plumpton College Farm**

Date of trip **WEDNESDAY 13TH MARCH 2019**

Name of pupil.....

Class.....

I enclose £13.70 (Cheques made payable to Durrington Infant School), as my contribution for the above named trip. Please place all money/cheques in a sealed envelope with your child's name, class, amount and what it is for clearly written on the front.

I enclose the deposit of £8.70, and will send in the remaining £5 by 1st March 2019

*My child requires a school packed lunch, or

*I will provide a packed lunch from home for my child

**Please tick appropriate boxes*

I give permission for my son/daughter to attend the above mentioned school visit and, having read the information sheet, agree to his/her taking part in any or all of the activities described.

I have ensured that my child understands that it is important for his/her safety and for the safety of the group that any rules and any instructions given by the staff in charge are obeyed.

I understand that whilst the school staff and helpers in charge of the party will take any reasonable care of the young people, unless they are negligent they cannot be held responsible for any loss, damage or injury suffered by my son/daughter arising during the duration of the visit.

I consent to any emergency medical treatment necessary during the course of the visit.

(Note: A school journey insurance policy with Zurich Municipal Insurance Limited is available through West Sussex County Council, though claims arising from a pre-existing condition are exempt).

CURRENT MEDICAL DETAILS

My child has the following illness or medical condition/s (for example asthma, diabetes, epilepsy, anaphylaxis, eczema, hayfever, travelsick).....

which necessitates the following treatment

Any Allergies ie nuts, plasters, penicillin.....

Any special dietary requirements.....

Date of last Tetanus injection.....Date of Birth

Doctor's Name & Surgery.....

Emergency Contact Name & Daytime Telephone Number

Home Address and Telephone Number

(Parent/Guardian) Signed..... Date.....



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Durrington Infant and Junior School



C parental consent to administer medication – Plumpton College Farm

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy and the manufacturer's instructions and/or Patient Information Leaflet (PIL) must be included

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff or school location]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I confirm that this medication has been administered to my child in the past without adverse effect. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s)

Date



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