

Principal:  
Roger Punton

Thursday 24<sup>th</sup> November 2016

**Year 7 residential trip to Kingswood – 15<sup>th</sup> - 17<sup>th</sup> February 2017**

Dear Parent/Carer,

At ARK Kings we believe it is important to offer our students the opportunity to expand their horizons through experiences outside the classroom. I am very pleased to inform you of an exciting opportunity for all year 7 students. We will be taking the whole of year 7 on an adventure activity residential to **Kingswood Adventure Activity Centre** in Staffordshire from **Wednesday 15<sup>th</sup>** until **Friday 17<sup>th</sup> February 2017**.

Throughout the residential students will have the opportunity to take part in an exciting range of activities, from indoor initiatives, to team challenges and outdoor adventures. The aim of these activities is to allow students to try some fun, new activities, develop new skills and allow them to have some of the 'key experiences' and enhance their interpersonal, social, teamwork and leadership skills.

As we see such value in this trip, **we are funding a large part of this trip ourselves but** we are asking for a **£30 contribution** towards the cost of the trip. The cost includes return travel, accommodation and a full programme of activities. All meals are included, including break time snacks however students may bring some money with them to spend at the gift shop to purchase small souvenir type items.

We know this is a big step for some students who may be staying away from home for the first time, and as parents you will no doubt have questions. We would therefore like to invite you in for a short meeting **on Thursday 1<sup>st</sup> December from 4.30-5.00pm** where we can discuss the trip in more detail, and give you important information about exact timings, kit lists and procedures while we are away. If you cannot attend the meeting please contact your child's Form Tutor.

I really look forward to seeing you next week; in the meantime if you have any questions, please get in touch with myself or your child's Form Tutor. Please return the attached **behaviour contract and consent form along with the fee by Friday 9<sup>th</sup> December 2016** at the latest.

Yours sincerely,

**Mr M Rajani**  
**Head of Year 7 Learning**

# Kingswood Adventure Activity Centre – Parental Consent Form and Behaviour Contract

Name of student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Form Group: \_\_\_\_\_

Trip to: Kingswood Adventure Activity Centre Dates: Wednesday 15<sup>th</sup> – Friday 17<sup>th</sup> February 2017

## Behaviour and Safety

I agree to \_\_\_\_\_ (name) taking part in this visit/offsite activity and have read the information included in the letter from the visit/offsite organiser. I agree to \_\_\_\_\_'s participation in the activities described. I acknowledge the need for \_\_\_\_\_ to behave responsibly and I will impress on her/him the need to behave responsibly and to help the leaders to ensure the safety of everyone on the visit/offsite activity. I am aware that I will be asked to fund the early return of my daughter/son should her/his conduct give cause for concern during the visit/offsite activity.

I am aware that the school has a detailed policy on the safe running of educational visits/offsite activities, which I can obtain from school. I am also aware that the school's educational visits/offsite activities are always well organised with a particular attention paid to health and safety. I understand that there can be no absolute guarantee of safety, but appreciate that the school organiser of the visit/offsite activity retain the same legal responsibility for students as they have in school and will do everything that is reasonably practicable to ensure the safety of everyone on the visit/offsite activity.

## Declaration

I understand that whilst the school staff responsible for supervision duties during the visit/activity will take all reasonable care and precautions, they cannot be held responsible for loss, damage or injury suffered by my daughter/son as part of the activities described or journey to/from the site of the visit/activities.

I understand that it is my responsibility to ensure that my daughter/son arrives on time at the correct departure location. I also understand that, where applicable, it is my responsibility to arrange and ensure her/his safe journey home on return to school after the visit/activity.

I agree to my daughter/son receiving medication as instructed and any emergency dental, medical or surgical treatment, as considered necessary by the medical authorities present.

## Additional Information

I confirm that the medical and contact information I gave to the school in September is correct and up to date and I understand that this information must be accurate in case it needs to be used in an emergency.

As this is a residential trip if there is any additional information you would like the trip leaders to be aware of, (such as travel sickness, issues sleeping etc.) please outline below: Can you also outline any medication and specific dietary requirements in the box below.

I enclose cash/cheque for the amount of £30 – non-refundable (please circle)

Signed: .....

Date:.....

Print Name: .....

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