

Amesbury CE VC Primary School
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Wiltshire SP4 7AX
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Email: office@amesbury.wilts.sch.uk
Website: www.amesbury.wilts.sch.uk

4th February 2020

Dear Parent/Carer

Year 6 (current Year 5) residential trip – Tuesday 24th November-Friday 27th November 2020

We hope your child is looking forward to the residential trip in November.

Where is Govilon Activity Centre and how do we get there?



Govilon is a non-profit making educational facility located in Abergavenny, on the edge of the Brecon Beacons in Wales. For more information, visit: <http://www.govilon.org.uk>

Travelling time is around 2 hour 30 minutes by coach. We will leave at **9 am** on **Tuesday 24th November** and we will return to school at **approximately 4 pm** on **Friday 27th November**.

What will the children do?

We have organised an action packed few days with activities designed to challenge, build teamwork and be exciting. Although the final itinerary is being finalised (and subject to change), some highlights will include:

- Gorge Walking
- Mountain exploration
- Tunnelling
- A visit to The Big Pit



Cost

The cost per child will be **£265** which includes:

£237 – Activities, food and accommodation £28 – Transport

Payment Options

A deposit of £25 will be required by Friday 5th April 2020 to secure your child's place on the trip.

PAYMENTS CAN ONLY BE MADE ONLINE, VIA SCOPAY.

Following the £25 deposit, you will have the option to pay in instalments of **£20 per week over 12 weeks**, with the first payment due by Friday 1st May 2020. (You can, of course, choose to pay in full, or pay as many payments as you can manage at any time.)

THE FULL AND FINAL AMOUNT MUST BE PAID BY Friday 17th July 2020.

The final balance is due by the 17th July, as this is the point that the school will be required to pay Govilon Activity Centre before the residential.

A packed lunch will be required on the first day. If your child usually has a school lunch, you will need to ensure you select a packed lunch option when choosing their meal on SCOPAY for that day. However, we would ask you to provide them with drinks.

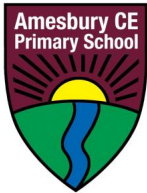
Please complete and return the forms attached to this letter as soon as possible.

If you have any questions, please do not hesitate to ask.

Miss Buck and Mrs Timmins

Year 6 Teachers





GOVILON RESIDENTIAL VISIT – November 2020

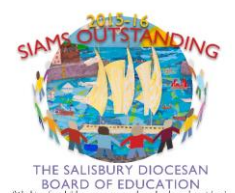
Child's name: Class

- I wish my child to have a place on the Govilon Activity Centre visit. We/I have discussed the trip with them and they wish to attend.
- I understand staff reserve the right to refuse to take a child to Govilon Activity Centre if their behaviour at school is causing concern.
- We have already paid the **£25 non-refundable** deposit, or have paid in full. If paying in instalments, I confirm I will pay online.
- I have read the information regarding how and when to pay and understand that, for my child to participate in the trip, I must make the full payment of £265 by 17th July 2020.
- I understand that, by agreeing to pay the cost of the trip, I WILL BE BOUND BY CANCELLATION FEES. The later I leave it to cancel the less money I will receive in refund. (The exact amount of loss of monies will be according to Govilon Activity Centre cancellation policy).
- I am aware that insurance arrangements are the same as for pupils in school, ie, (a) the local authority only provides cover against proven or agreed negligence by the authority and its employees; (b) I should consider making my own insurance arrangements for personal accident cover for my son/daughter for school activities in the UK.

Signed..... (Parent/Carer)

Date:

Print name.....





GOVILON RESIDENTIAL VISIT – November 2020

Please return to school by Friday 22nd May 2020

Name of child:

Date of Birth: Age (at time of visit):

EMERGENCY CONTACTS

Emergency Contact 1 Name:..... Tel:.....

Emergency Contact 2 Name:..... Tel:.....

MEDICAL CONDITIONS

Details of any medical conditions or regular medication (eg, asthma, eczema, bed wetting, hay fever, allergies etc)

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Does your child suffer from travel sickness? Yes/No

Does your child suffer headaches/migraines? Yes/ No *Please circle as appropriate*

If yes please explain the causes and what your child does to relieve the pain:

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If your child requires medication, please also complete the appropriate form, available from the school office

DIETARY REQUIREMENTS

Please provide details of any special dietary requirements (eg, Vegetarian, Gluten Free, Specific Religious diets, food allergies):

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SWIMMING ABILITY

As the Gorge Walking will involve being in and around shallow rivers, please provide details of your child's swimming ability (tick one):

Non Swimmer

Water Confident

Can swim 50 m

