High Littleton C. of E. Primary School, High Littleton, Bristol BS39 6HF

Part of the Midsomer Norton Schools Partnership

Tel: 01761 470622 Fax: 01761 472800 Email: office@highlittletonschool.com
Web: www.highlittletonschool.com
Head Teacher: Mr Gareth Griffith



9th January 2024

Dear Parents/Carers,

Thank you for attending the meeting today. I hope it was useful and clarified a few questions you may have had around the residential visit to PGL, Little Canada, Isle of Wight on Monday 18th March—Friday 22nd March.

As you know we will be travelling to PGL with both Farrington Gurney and Clutton Primary Year 6. We will spend some time with these children, including eating together and some activities together (but not mixing rooms). It will be a great opportunity to meet children from other schools who may well be at the same secondary as your child next year!

This letter will further clarify the following:

- * Overview, accommodation and facilities
- * Activities and Itinerary
- * Clothing List
- * Rules for the trip
- * Medical Form and permission

I expect us to leave school at around 9.30am on Monday 18th March, and we will be back to school at approx 7pm on Friday 22nd March. A 'final arrangements' letter informing you about the exact drop-off times will be sent out nearer the time of the residential during Term 4.

Please complete the attached parental consent forms and medical form by Friday 9th February.

If you have any questions please do not hesitate in contacting the school.

Yours sincerely,

Mr Gunning

Mr Gunning
Deputy Headteacher











OVERVIEW, ACCOMMODATION and FACILITIES

On the Isle of Wight, Little Canada is located in 48 acres of beautiful woodland on the banks of Wootton Creek. The centre offers distinctive log cabin style accommodation and a diverse range of indoor and outdoor activities.





ACTIVITIES

We haven't had our activities confirmed yet, however these are possible activities:

Abseiling Aeroball
Archery Sensory Trail
Challenge Course Fencing
Outside Climbing Trapeze
Giant Swing Jacobs Ladder
Problem Solving Zip Wire

The children will spend most of the day outside therefore it is vital that they wear lots of layers and have waterproof tops and bottoms.

The children will be split into two groups for activities with either Mrs Gibson or myself with each group. Sometimes both groups come together for certain activities. We will also have Mr Hayes with us for the week. There will be four evening activities which could include: Ambush, Passport to the World, Campfire and of course a disco on the final night.

Sample Itinerary

07.30: School staff wake up the groups

08.20: Breakfast

09.15: First activity session

10.45: Break

10:55: Second activity session











12.25: Lunch and supervised free time14.15: Third activity session15.45: Break

15.55: Fourth activity session17.25: Supervised free time18.00: 3 course evening meal

19.00: Organised evening entertainment and games

21.00: Children back to rooms22.00: Into beds and lights out

CLOTHING LIST

Being an early spring residential, it is likely that children will need a full range of clothing. Several of the activities will need long sleeves and trousers for Health and Safety reasons and during the evening/night the children will need a hoodie and coat. Of course, there is also a fair chance of rain, so a waterproof jacket would also be required.

This list is compiled **as a guide** to what is required. We hope that you will not need to make any special purchases. This is an educational trip on a rural site so all clothing should be comfortable and practical. Please limit your luggage to one **medium-sized** holdall or suitcase - **remember we are only away for four nights.**

Clothes	Toiletries	Extra items
 Hooded waterproof coat (preferably lightweight cagoule rather than thick padded coat – these will get wet and dirty) 2 pairs of trainers suitable for activities plus walking boots or wellies Gloves and warm hat Plenty of socks - not just trainer socks Changes of underwear for each day plus spares Enough T shirts or tops for 5 days Three thick jumpers or hoodies 3 pair of trousers/leggings for activities - not jeans Evening clothing - Trousers/skirts - jeans okay Nightwear Sunhat/baseball cap Swimwear (no wetsuits) 	 Two towels Deodorant Hairbrush Toothpaste Toothbrush Shampoo/conditioner Face wash/soap/shower gel Wash bag Hair-bands to tie back long hair 	 Plastic water bottle Digital camera A maximum of £20 pocket money for gift/tuck shop. Book Pens, pencils etc. Torch and batteries Watch 2 plastic bags/black sacks for dirty/wet clothes Two bags of sweets/snacks max. Sun Cream (High spf) Sleeping bag and pillow required

Please ensure that **ALL** clothing is **NAMED**

Hair-straighteners, mobile phones, or any sort of electronic games are **not** allowed so please **DO NOT BRING THEM**











RULES OF THE TRIP

As with all trips we need to have rules. These rules are for the benefit of everyone - you, the teaching staff, all the other people in the party and the staff at the centre.

- Use your common sense at all times think about the consequences of your actions.
- Be thoughtful, helpful and polite to <u>ALL</u> other people at <u>ALL</u> times.
 <u>REMEMBER</u> manners cost nothing.
- Always be punctual, particularly for meals for which you must have clean hands and be suitably dressed.
- Get up in the morning when you are told to do so by an adult and not before

 remember that although you may be awake, there will be others who are
 not.
- Keep your room tidy and make your bed every day your room will be inspected each evening.
- Ensure that you have a shower every day.
- Mobile phones and electronic games are not allowed, so do not bring them.











PARENTAL CONSENT FORM

School Residential Trip 2024 – PGL little Canada

Monday 18th March - Friday 22nd March

Date of Rirth

Child's Name		Date of Birth	
Full Home Address			
Home Telephone Number			
In accept one again,	Name and relationship to	child	Mobile number
In case of emergency please contact the	1		
following parents /	2		
carers in this order:	3		
Monday 18 th № I give permission I give permission I believe that t	vermission for my child to attend the March – Friday 22 nd March. On for my child to participate in the on for my child to travel by coach a he information I have provided about the contraction of the	e activities described	d
☐ I agree to my o	ny changes as soon as possible child receiving medication as instruent as considered necessary by	• •	
Signature of Parent/C	Carer:	Da	te:

Midsomer Norton Schools Partnership (MNSP) Notes: There is in force a policy of insurance in respect of this trip which provides cover for the matters referred to in the attached documents. You may decide to take out additional, private insurance. MSNP through its employees and agents will at all times take reasonable care of your child and with them, his/her personal effects and money. If your child has an accident or suffers loss or damage to his/her personal effects and money which is not as a result of any lack of care on the part of the MNSP, its employees or agents, the MNSP will not be able to pay any damages or meet any expenses arising. Similarly, if your child incurs any liability towards a third party or damage caused to the third party property, the MNSP will not be responsible for this unless it can be shown to be at fault in some way.











MEDICAL FORM - CONFIDENTIAL

Please tick one as appropriate:	
$egin{array}{c} \Box$ I confirm that my child does not suffer from any medical condition requiring regular t medication	reatment or
OR	
☐ My child suffers fromeczema, migraines, travel sickness) requiring regular treatment or medication.	_ (eg asthma,

Please list details below and give all medication to Mrs Gibson in a small clear bag on the day of departure.

Name of treatment or medication	When treatment needs to be given	Instructions (eg How much? How treatment or medication needs to be administered)
1.		
2.		
3.		

Chosen Dietary Requirements (e.g. vegetarian)	Allergies incl. food allergies (e.g. food, plants, animals, medication)	Physical disabilities (e.g. anything that may prevent the child from taking part in activities)











Doctor's Name	
Surgery Address and Telephone Number	Address
	Telephone

Personal Information (e.g. bedwetting, sleep walking/talking, sleeping with	
light on, toilet/sanitary) This information is kept entirely confidential	
<u>sem semal</u>	

Signature of Parent/Carer: _____ Date: _____









