



Dale Avenue, Hassocks, West Sussex, BN6 8LP

Telephone: 01273 845892

Facsimile: 01273 846358

E-mails: office@downlands.w-sussex.sch.uk
head@downlands.w-sussex.sch.uk

Headteacher: Mr M Wignall

March 2019

Dear Parent/Carer

DUKE OF EDINBURGH AWARD SCHEME BRONZE PRACTICE EXPEDITION

In order to familiarize those pupils with little or no previous camping experience with the equipment and skills required in their forthcoming Bronze Expedition we have organised a practice overnight camp on **Saturday 27 - Sunday 28 April**.

This will involve a lightweight backpacking walk of approximately 10 miles in the Mid Sussex area, followed by an overnight camp at Southdown Caravan & Camping Park, Keymer, and a further walk of about 5 miles next day. The groups will initially be accompanied in order to teach them the skills required and if appropriate, they will subsequently be monitored via a series of checkpoints.

The telephone number of Southdown Caravan & Camping Site is 01273 - 841877 and the mobile number for this trip will be 07542 -- 034029 but it must be stressed that these are for **emergency use only**.

The cost of the trip will be £ 25.00 and this will cover camping expenses, fuel and insurance.

Please return the reply slip below and payment of £25.00 to the "Trips Box" in reception in a sealed envelope with the name of your child, tutor group and "Duke of Edinburgh – **Saturday 27 - Sunday 28 April**. trip written on it by **Friday 29 March**. You can also pay online, but please return the reply slip below to the "Trips Box". (Cheques to be made payable to Downlands School).

As part of their planning / preparation, each group of between four and seven pupils will be expected to supply their own food for the weekend. This should include an evening meal, breakfast and a packed lunch for both Saturday and Sunday.

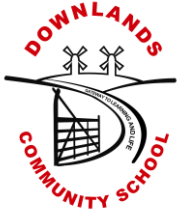
The groups should be dropped at their respective start points at **10 am on the Saturday** and should be finished and ready for collection at approximately **1.30 – 1.45 pm on the Sunday** afternoon. Details of start points will follow after discussion with groups.

If there are any further queries regarding details of the practice trip or of the qualifying expedition later in the year, please do not hesitate to contact me.

Yours faithfully

A Cochrane
Duke of Edinburgh's Award Scheme Coordinator





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PARENTAL CONSENT FORM

BRONZE DUKE OF EDINBURGH AWARD EXPEDITION

An expedition in Mid-Sussex for practice and experience of navigation and walking skills as part of the Duke of Edinburgh Award from **Saturday 27 - Sunday 28 April** inclusive.

I wish my son/daughter _____ (full name of child in capitals please) of tutor group to be allowed to take part in the above-mentioned school trip and, having read the information sheets, agree to his/her taking part in any or all of the activities described.

*I enclose payment of £25 (Please make cheques payable to *Downlands Community School*)

*I have paid online

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 agree that my child may participate in the above activity. The school has taken out a School Journey Insurance Policy underwritten by AIG for each pupil attending this activity, though claims arising from a pre-existing condition are exempt. The policy includes fixed levels of benefits in respect of Personal Accident and Personal Property. A copy of the policy schedule is available upon request. Any claim made under this policy does not affect your statutory rights. In respect of legal liability please note the school cannot be held responsible for any loss unless negligent.

Please delete and complete the following as is appropriate.

Child's name:

Date of Birth:

My child has no illness, allergy, or physical disability *
 the following illness or physical disability * (* Cross out which does not apply)

which necessitates the following medical treatment:

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

Signed _____ (Parent / Carer)

P.T.O.





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Special dietary requirements that accompanying staff need to be aware of

HOME ADDRESS

HOME TELEPHONE _____

If not available at the above, please state an alternative contact.

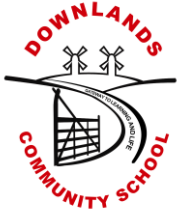
Name _____

Telephone no. _____

Doctor _____

Surgery _____





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DUKE OF EDINBURGH AWARD SCHEME

EXPEDITION KIT LIST

BRONZE PRACTICE

Rucksack
Boots
Gaiters -- optional
Cagoule / Anorak -- must be waterproof !
Waterproof Trousers
Sleeping Bag
Carrymat -- if required (lilo okay but heavier)
Torch and spare batteries
Knife / Fork / Spoon / Teaspoon -- All clearly marked
Unbreakable Mug / Plate / Bowl --- All clearly marked
Tin opener - if taking tins !!
Tea Towel
2 x Polythene Bin Liners for damp / dirty clothes
Personal Wash Gear -- Toothbrush / Toothpaste / Soap etc.
Towel (small)
Training Shoes - Optional (leather are more waterproof than nylon)
Change of underclothes for each day
Thick woollen socks -- 2 / 3 pairs
Thick warm trousers / jogging bottoms NOT JEANS
Spare pair of trousers
2 x Shirts / T-Shirts
Thick sweater / sweatshirt
Jogging suit / Tracksuit / Pyjamas -- as required
Shorts (check weather !!)
Handkerchiefs / Tissues
Small pack of plasters / personal First Aid kit
String + a few safety pins
Notebook and pen / pencil
Woolly hat / sun hat / Gloves -- depending on time of year
Water Bottle -- approx. 1 litre
Matches inside a plastic bag / container
Washing up kit per group



* Make sure any other items brought are **USEFUL** and **REASONABLE** !

** **NO SHEATH KNIVES / CATAPULTS / AIR GUNS** etc.

*** Make sure all kit is **inside** your rucksack and that the rucksack is done up -- including the pockets. Rucksacks should be lined with a bin liner to ensure water resistance.

**** **MOBILE PHONES** are not allowed unless as part of emergency kit in a sealed container.

***** If it won't fit into your rucksack ---- **LEAVE IT BEHIND !**
YOU PROBABLY WON'T NEED IT !

