

ACTIVITY INFORMATION SHEET and CONSENT FORM FOR PARENTS

ACTIVITY: **Outward Bound 'Leadership Development'**

DATE(S): **Monday 19th to Friday 23rd August 2019**

Your son/daughter is involved/wishes to participate in the above Activity, **subject to your written consent.**

| | | | |
|---|---|--|-------|
| General Description including Location: | | | |
| The Outward Bound Trust is an educational charity that develops young people through learning and adventure in the wild. Their Outward Bound Centre at Loch Eil near Fort William is first rate with excellent facilities and highly trained staff. Details of activities on accompanying letter. | | | |
| Name of Leader/Organiser: | | M Aitchison/C Farrell (Tain Royal Academy) | |
| Names of Staff/Adults Assisting: | | 2 TRA staff plus 1 from Invergordon | |
| Number of Pupils | 7 | Approximate Age | 15/16 |
| Date, Time and Place of Departure | | Date, Estimated time and Place of Return | |
| 9:15am on Monday 19 th August from Invergordon Academy | | Approx. 3pm on Friday 23 rd August at Invergordon Academy | |
| Details of required clothing, footwear, equipment, food or other requirements. | | | |
| <u>Example kit list – more information to follow.</u> (Please note this is only an idea of what is required, do not buy things specifically) | | | |
| Casual t-shirts Sweatshirts Thermal tops Jumpers Fleece tops Thick and thin walking socks Synthetic trousers for walking (not jeans) Jeans (for around the centre only) 2 pairs of trainers (one which can get wet) Underwear Pyjamas | | Shorts Hat and gloves Towels and swimwear Prescribed medication (where necessary) All courses will involve getting wet at some point, so please make sure your child has plenty of spare dry clothes to change into. | |
| Emergency Contact Person | | Mr M Aitchison | |
| Telephone Number(s) | | 01349 852362 | |

Cheques are payable to 'Invergordon Academy School Fund'. If you would prefer to an online payment please ensure that you enter OB PUPIL NAME in the reference section of the on-line payment. E.g. OB JOE BLOGGS

Name of account: **Invergordon Academy School Fund**
Sort Code: **83-23-08**
Account number: **00180681**

Royal Bank of Scotland
High Street
Alness

CONSENT FORM

Your son's/daughter's participation is dependent on your written agreement. Please complete the Consent form below and arrange for it to be returned to the school.

If there are any medical conditions or any other matters which you would wish that we know, please complete this on the consent form.

Name of Activity: Outward Bound 'Leadership Development'

Dates: Monday 19th to Friday 23rd August 2019

Name of pupil:

I agree to the participation of my son/daughter in the above activity and note the details of the proposed arrangements. I have retained the information sheet for future reference.

Please tick that you agree with this statement: ☐

I know of no existing medical condition and undertake to advise the leader/organiser of any future relevant medical condition which may affect my child's participation in the activity covered by this consent.

Please tick that you agree with this statement: ☐

I advise you of the following Medical Condition(s) which may affect my child's participation in the activity:

Signature of Parent/Guardian

Telephone Number(s) (including emergency)

Address

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