



**Oundle School Trip Consent and Medical Form
South Africa and Mozambique July 2010**

Sunday 11th July, Heathrow 1600 drop off Monday 26th July, Heathrow 0655 pick up

All pages of this consent form must be completed, signed by Parent/Guardian, and returned to the Trip Leader thereby agreeing to the conditions below and that the named pupil may join the trip.

Pupil Name..... **House**

Cost of Trip

The cost quoted is the best possible estimate of the total cost of the trip. It is expected that most trips are completed within budget but if there is a significant shortfall due to unforeseen conditions beyond the School's control (e.g. Fuel surcharge, Currency fluctuations) the School may request a further payment on the first bill after the trip.

If there is a significant surplus parents will be refunded on the next bill.

Withdrawal from Trip

If I withdraw the named pupil from the Trip I understand that I will be liable for a minimum of 25% up to 100% depending on the time of withdrawal and to ensure all costs to the School are covered.

Insurance

A summary of the School's insurance cover is as follows.

- Up to £25,000 personal accident per policyholder, to a maximum aggregate of £2,000,000 for any one Event.
- Up to £5,000,000 for medical expenses (no policy excess is applicable)
- Up to £3000 cancellation or curtailment expenses for any one Journey not but exceeding £50,000 overall for all policyholders arising out of any one Journey as long all steps have been taken to recover costs from suppliers (no policy excess is applicable)
- £10 per day if a policyholder is unable to participate in any organised visit or event to a maximum of £150 per trip
- £500 for additional accommodation and travel expenses to reach the destination incurred following failure of public transport or breakdown of the vehicle conveying the trip to the UK departure point. (£50 policy excess per policyholder)
- Up to £90 for travel delay (applies only to trips outside the UK of more than 12 hours duration)
- Up to £2,500 for loss of, or damage to baggage, clothing and personal effects, with a total valuables limit of £750 and £500 single item limit. (£50 policy excess applied per policyholder)
- Up to £50 per policyholder for loss of money, travellers' cheques, etc. with a cash limit of £100 for pupils under 16. This limit is increased to £2,000 per teacher/organiser. (£50 policy excess applied per policyholder)
- Up to £100 for essential replacements where baggage is temporarily delayed for more than 12 hours.
- Up to £750 for emergency passport replacement while out of the UK
- £2,000 passenger protection cover for loss of deposits or other charges paid in advance of the additional cost of completing or curtailing the trip due to insolvency of the School.

Declaration

- I consent to my son/daughter taking part in this visit.
- I understand the costing information and insurance arrangements for the proposed visit.
- My son/daughter is in good health and able to participate in the proposed activities.
- (DAY PUPILS ONLY) I have noted where and when the pupils are to be returned and I understand that I am responsible for my child getting home safely from that place.
- I have completed the required medical details (overleaf) and give permission for proprietary medicines (as indicated) to be administered if deemed necessary.
- I will notify the School of any changes in circumstances that affect his/her participation.
- In the event of an emergency I agree to my child being given any medical, surgical or dental treatment, including general anesthetic and blood transfusion, as considered necessary by the medical authorities present.
- I will ensure that adequate supplies of medication are provided (when appropriate).
- I agree to my son / daughter taking part in the above stated visit and, having read the information sheet, agree to his/her participation in any or all of the activities described.
- I acknowledge the need for good conduct and responsible behaviour on his/her part.

Signature of Parent/Guardian..... **Print Name**..... **Date**.....

For all overseas trips please attach a photocopy of the Passport page that contains name and photograph.

1. Pupil and Contact Details

South Africa/Mozambique trip Pupil Name..... House

Departing 1900 Sun 11th July) Returning 0655 Mon 26th July

Telephone: Home (full number)Work (full number)

Mobile Phone (Father) (Mother)

E-mail

Address.....

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Emergency contact details [Please state an alternative contact point (e.g. family member, friend)]:

Name and address of contact

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.....Telephone.....

2. Medical Information

If your son/daughter suffers from any of the following conditions please circle yes and give details – Expand on a separate sheet if needed		
Asthma, Bronchitis, Chest problems, Diabetes, Epilepsy, Fainting attacks, Heart trouble, Migraine, Raised blood pressure, Tuberculosis	Yes/No	
Does your child suffer from any other condition requiring medical treatment, including medication?	Yes/No	
Is your child allergic or sensitive to any medication, insect bites or food?	Yes/No	
Is your child fully up to date with Tetanus immunisations?	Yes/No	Please state which vaccinations not received.
Is your child up to date with all immunisations recommended for the UK? (of particular interest are Meningococcal C and Mumps, Measles and Rubella)	Yes/No	
Does your child suffer from any phobias?	Yes/No	
Is your child taking any form of medication on a regular basis? If YES , please give full details, including the type of medication and dosage:	Yes/No	
The following proprietary medicines may be given; Paracetamol, Ibuprofen, Antihistamine	Yes/No	
Please list any medications that must not be given.		

To the best of your knowledge, has your child been in contact with any contagious or infectious diseases, or suffered any recent condition that may become infectious or contagious? If so please list and give details.	Yes/No	
Please state any specific dietary requirements.		

3. Adventure Activities

I agree to my son/daughter taking part in the following activities

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| Scuba Diving | Yes/No |
| Swimming | Yes/No (subject to conditions in ADM's letter) |
| Snorkelling | Yes/No |
| Yacht/Boat Trips | Yes/No |
| Kayaking | Yes/No |
| Quad Bikes | Yes/No |
| Horse riding | Yes/No |