



PARMITER'S SCHOOL

FOUNDED 1681

Headmaster: Mr M Jones BA MEd

August 2020

Dear Parents/Carers

Duke of Edinburgh Gold Award 2021

Your son/daughter has expressed an interest in undertaking the Duke of Edinburgh's Award at Gold level.

Students who have undertaken their Silver Award do not have to complete it before enrolling for their Gold Award and they may continue with the activities that they undertook for that Award. It is not a requirement that students should have done either their Silver or Bronze; they can go straight to Gold. More information can be found at <http://www.dofe.org/>. Any student who did not partake in the Silver Award will be able to enrol for the Gold Award but will be expected to be confident at map reading and navigation before the expedition; additional training with the school may be necessary. **The initial charge for enrolling on the Award is £29.00 which is non-refundable.** This provides for the enrolment pack, record book and access to www.edofe.org.

The school does not run the Gold Expeditions but uses an outside provider, Peak Pursuits, for this purpose. The Practice Expedition section of the Award will take place at the end of June/early July in the Peak District. The Gold Final Expedition will take place in September 2021 in the Yorkshire Dales. Attendance at both is mandatory. If students do not undertake their expeditions with the school, they will have until their 25th birthday to achieve their Gold Award; a number of Universities and other Accredited Activity Providers offer expedition opportunities. In addition to the Expeditions, there will be a 2-day training session at school (not staying the night) over a weekend in March 2021. That training session is also mandatory.

The overall cost for the expeditions and training will be £629. Payment can be made either in full or in three instalments but **the registration fee of £29.00 is due now.** The three instalments of £200 each will become due on 1 October, 1 November and 29 January. Please make your payment via WisePay (under Clubs and Activities). Please complete the reply slip below, along with the medical form and Peak Activity consent form, and return them via Google Classroom as soon as possible. It may be possible for students to apply to Local Councillors and other bodies to seek contributions toward the cost of undertaking the Gold Award.

By paying, you are giving permission for your child to take part in the above activities. Please advise the school office of any changes in health or medical conditions and emergency contact telephone numbers.

Any behaviour on any activity connected with the Award which is considered to be inappropriate will result in the student being rejected from the scheme without refund.

Yours sincerely

Mark Holloway
Duke of Edinburgh Co-ordinator

Duke of Edinburgh Gold Award 2021

(Please return via Google Classroom)

(Please tick as appropriate)

- I have read and understood the terms of the letter dated August 2020.
- I understand that students must bring their own medication where necessary, including hayfever and pain relief.

Fee:

- I have paid the registration fee of **£29** via WisePay. Payment Reference No: _____
- I have paid the first instalment of **£229** via WisePay. Payment Reference No: _____
- I have paid the full amount of **£629** via WisePay. Payment Reference No: _____

Student Name: _____ Date of Birth: _____

Student e-mail address: _____

Parent/Carer Signature: _____

Parent/Carer e-mail address: _____

Student Mobile Number: _____

Parent/Carer Mobile Number: _____

Print Student Name: _____

Signed: _____ Date: _____

PARMITER'S SCHOOL
DUKE OF EDINBURGH GOLD AWARD (2020)
PARENT/GUARDIAN CONSENT AND INFORMATION

Please complete, in full, these questions

SECTION A: STUDENT INFORMATION

SURNAME:	FORENAMES:
DATE OF BIRTH:	AGE: (years on day of departure)
HOME ADDRESS POSTCODE:	NAME OF DOCTOR: (required if consultation is necessary) ADDRESS NATIONAL HEALTH SERVICE MEDICAL CARD NO:
HOME TELEPHONE NO:	
STUDENT MOBILE:	
STUDENT EMAIL:	

MEDICAL INFORMATION

It is most important that we should know of any pre-existing medical condition (for example, asthma, diabetes, heart trouble), which may require treatment.

If, within two days prior to departure on ANY journey, your child becomes ill, you should have her/him seen by your own doctor.

*Delete the following as appropriate

*My child does NOT suffer from any pre-existing medical condition requiring treatment.

*My child suffers from which may affect him/her taking part in the activities on the trip.

*The following treatment may be required

*Known allergies to drugs or other medication are

Please attach letter if necessary.

SECTION B: PARENTAL INFORMATION

GUARDIAN'S/ FATHER'S NAME	GUARDIAN'S/ MOTHER'S NAME
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HOME ADDRESS	HOME ADDRESS
.....	(if different from father)
.....
Home Tel. No.	Home Tel. No.
Mobile No.	Mobile No.
BUSINESS NAME	BUSINESS NAME
BUSINESS ADDRESS	BUSINESS ADDRESS
.....
Tel. No. Ext.	Tel. No. Ext.
Alternative contact at place of work:	Alternative contact at place of work:
.....
Usual hours at work	Usual hours at work

SECTION C: INSURANCE

Insurance has been taken out through County. Details of the policy are held by the Finance Office. This does not cover valuable items such as radios, mobile phones, MP3 players, etc., which should therefore **NOT** be brought, or if brought, should be insured by the family.

SECTION D: RULES AND DISCIPLINE

Behaviour on the Award is expected to bring credit to the student and to the school. The staff expect full co-operation at all times.

Where appropriate: At no time should any student be on their own. Permission must be asked whenever students want to go anywhere without staff.

The "lights out" time will be at the discretion of the Award leader.

The staff reserve the right to send your son/daughter home at any point during a trip on the grounds of unacceptable behaviour.

SECTION E: DECLARATION

Please read carefully and sign below:

- I certify that my son/daughter is not suffering from any medical condition to impact their enjoyment of the itinerary provided.
- I understand that, while the school staff in charge of the group are in loco parentis and will take all reasonable care of the children, they shall not be held responsible for any loss, damage or injury suffered by my son/daughter.
- I understand that my son/daughter will not be supervised at all times.
- I accept the conditions, under Section D, on discipline.
- I consent to any emergency treatment, including the use of anaesthetic, blood transfusion, during the course of the Award, and for the local doctor to contact my GP at his discretion.
- I have received the details of the insurance cover. (If I require any further, additional cover, I will arrange it.)

- I undertake to inform the party leader if my child or any member of the family suffers from any infectious disease within 21 days prior to a journey. (Insurance requirement.)

Signature:	
Relationship to student:	Date: