



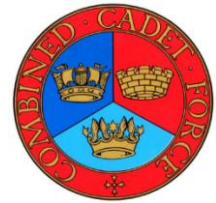
CATERHAM SCHOOL COMBINED CADET FORCE

Harestone Valley Road, Caterham, Surrey CR3 6YA

Tel: 01883 335 061

Fax: 01883 347 795

Email: ccf@caterhamschool.co.uk



Contingent Commander: Wing Commander K M Bage BSc (Hons) MBA MCIM RAFVR(T)

Our reference: AT/BTEC/0411

Date: 7 March 2011

ANNUAL BTEC EXPEDITION/SELF-RELIANCE EXERCISE 2 - 3 APRIL 2011

General

1. The above Adventurous Training, British Technical Education Council (BTEC) Expedition (Fifth Year) and Self-Reliance Exercise (Third Year) will take place in the Caterham/Headley area on the weekend of the 2 – 3 April 2011.
2. The purpose of the expedition is to enable cadets to gain a qualification for the BTEC Award or complete their Recruit Training. The aim is to gain experience in the use of map & compass in the field, as well as test individual leadership qualities and the ability to be self-reliant. The completion of this expedition is a compulsory requirement of the BTEC qualification (Fifth Year) and Recruit Training (Third Year).
3. The cadets will be walking approximately 15 miles over the course of the two days, and camping at Headley. Tents/shelters and food will be provided.

Administration details

4. Additional administrative details are as follows:

Cost: £20.00 per cadet (Cheques payable to 'Caterham School CCF Welfare A/C')
Transport: School Minibus
Parade: CCF Headquarters at 0900 hrs, Saturday 2 April 2011.
Return: Approximately 1500 hrs, Sunday 3 April 2011.
Dress: Civilian clothing for the entire expedition. (See kit list attached).

Consent Form

5. To confirm your place complete and return the attached consent and medical form together with a cheque to Sqn Ldr Armitage no later than first parade on **Wednesday 23 March 2011**

Insurance

6. iPods and mobile phones must not be brought on the expedition, however, ONE mobile phone will be allowed per group for emergency purposes only. Pupils are advised that they bring valuables at their own risk. Pupils are covered for trip insurance with HSBC School Journeys Insurance Policy. This policy also includes pupils' personal possessions – these are covered for loss/damage under the School's Insurance travel cover with HSBC Insurance Brokers Limited.

Supervision

7. Please note that whilst all events are organised and managed by the Contingent staff, there will be occasions when the direct supervision will be provided by the senior pupils of the Unit. Consequently the highest standards of behaviour are expected at all times.

Briefing

8. The initial Expedition briefing will take place during the parade on Wednesday 30 March 2011. All cadets participating in the Expedition must attend.

Queries

9. The point of contact for all matters concerning this Expedition and during the expedition is Flt Lt S Barber. **The Emergency contact number during the exercise will be 07950 188 391.**

{Original Signed}

S BARBER

Flt Lt

For Contingent Commander

Distribution:

All participating Cadets & Staff

Equipment Requirements:

Individual:

No Mobile Phones (except 1 per group – emergency use only)

No iPods are allowed

Boots

Walking Trousers (+spare) **Not Jeans**

Shirt (+ spare)

Sweaters (+ spare)

Jacket (fleece and/or windproof)

Watch

Hat & Gloves (Thermal)

Waterproof jacket & Waterproof trousers

Water Bottle, Mug, Mess Tins, Knife Fork & Spoon (KFS), Thermos Flask

Socks (+ spare)

Wash Kit

Torch & spare batteries

Sleeping Bag

No Combat Clothing to be worn

Stores issue if required:

BTEC - Tent (2-man)

Self-Reliance Exercise – 2 x Ponchos per 3 Cadets

Bergen

Map, Compass & Whistle & Basic First Aid Kit

Fluorescent Jacket

Note: Walking clothing ideally should be of the fleecy type and worn in thin layers. Cotton tops/shirts are not recommended.



CATERHAM SCHOOL

PARENTAL CONSENT FOR A UK RESIDENTIAL SCHOOL TRIP

Please complete this form using BLOCK CAPITAL LETTERS

This form, or a copy, will be taken by the group leader on the trip. A copy will be retained by the SMT emergency contact.

Trip Description: **CCF BTEC Expedition/Self-Reliance Exercise**.....

Date(s) of Trip : From **2 April 2011**.....To **3 April 2011**.....

Trip Organiser : **Flt Lt S Barber**

Name of pupilForm

Pupil's date of birthdaymonthyear (e.g. 12.10.1994)

Parent/Guardian's name (and first emergency contact)

.....

Parent/Guardian's address.....

.....

.....

Telephone numbers:-

WorkHome

Mobile

Alternative Emergency contact name

Alternative Emergency contact address

.....

.....

Alternative Emergency contact Telephone numbers

WorkHome

Mobile

I will inform the Trip Leader as soon as possible of any changes in the details given on this form between now and the commencement of the trip.

Declaration

I agree to my son/daughter/ward taking part in the trip and confirm I have read and discussed the details on the trip information sheet with my son/daughter/ward.

I agree to my son/daughter/ward participating in the activities described on the trip information sheet.

I acknowledge that my son/daughter/ward understands the importance of behaving responsibly on the trip, in accordance with the details set out in the policy for Caterham School Trips.

I understand the extent and limitations of the insurance cover provided.

Name

Signed..... Date



CATERHAM SCHOOL

PARENTAL MEDICAL CONSENT FOR A RESIDENTIAL SCHOOL TRIP

Please complete this form using BLOCK CAPITAL LETTERS

This form, or a copy, will be taken by the group leader on the trip. A copy will be retained by the SMT emergency contact.

Trip Description: **CCF BTEC Expedition/Self-Reliance Exercise**.....

Date(s) of Trip : From **2 April 2011**.....To **3 April 2011**.....

Trip Organiser : **Flt Lt S Barber**

Name of Pupil

Form

Does your child follow a special diet?

Has your child ever had any of the following: YES/NO – If YES please give details

a) Allergies to any know drugs, state name of drug(s)

b) Any other allergies (please specify)

c) Asthma or bronchitis

d) Heart condition

e) Fits, fainting or blackouts

f) Migraine or severe headaches

g) Diabetes (sugar tolerance abnormalities)

Does your child have any other weaknesses or disabilities which require special care or attention?

Give details

.....

.....

Has your child been immunised against tetanus?

Date of last injection

Is your child receiving any current medical or surgical treatment?

If so, are there any special precautions or advice to follow in an emergency?

.....

Please list and give details of any illnesses or accidents that occurred during the last twelve months

.....

.....

National health service number

Name of General Practitioner

Address of GP

.....

.....

Telephone number of GP

I will inform the Trip Leader as soon as possible of any changes in the medical details given on this form between now and the commencement of the trip.

It is essential that in the event of your child requiring emergency medical treatment, that we have your consent for our staff to act on your behalf. Please would you therefore sign the declaration below to give us an authorisation.

Declaration

I agree to my son/daughter/ward receiving medication and emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present. I give my consent for a member of Caterham School Staff to act on my behalf should my child require such emergency medical treatment.

I agree for my son/daughter/ward to receive non prescribed medication from a member of the Caterham School staff if this is deemed necessary.

Please note that the School can not take responsibility for any existing ailment about which the School was not informed explicitly on this consent form.

Name

Signed..... Date

Information on the school's Policy for Welfare, Health & Safety on School Trips can be found on the website at www.caterhamschool.co.uk

All boarders are normally registered under the National Health Service with the *School Medical Officer, Doctor Christopher Warwick, Townhill Medical Practice, Guards Avenue, Caterham, Surrey CR3 5XL*
Tel: 08445 769218