

April 2024

Dear Parent/Guardian,

I am pleased to advise that we have the opportunity for our A level Religious Studies students to visit the Cittaviveka Buddhist monastery in Chithurst, Hampshire on **Tuesday 30th April 2024**.

During our visit we will have the opportunity to make 'dana' to the community (offerings made by the lay community to the monks and nuns), experience the ritual chanting, tour the monastery and take part in a question and answer session with a senior member of the monastic community. This will be a very valuable experience for the students and will give them first-hand experience of Buddhist teachings and practices.

We will leave school at 9.00am traveling by minibus and return by 4.00pm at the latest. Your child will need to bring a packed lunch, wear suitable clothing for a visit to a religious community and will need to remove shoes as they enter the shrine room.

The cost of the trip is **£17**, and students are also requested to bring along a couple of items of groceries (food, or eco-friendly cleaning products) as part of our dana (offering) to the monastery. Visiting students also often enjoy the opportunity to place something directly [such as wrapped sweets/chocolates] into the monks' bowls at the end of their walk to the kitchen to receive the food.

Payment should be made using the school's on-line Wisepay facility. Please make a note of your Wisepay receipt reference, as you will need to provide this on the attached slip/consent form.

To confirm that you give permission for your child to take part, please complete the attached reply slip and medical form and return to Mr Yapp by **Friday 26th April 2024**.

If you would like to find out more about the monastery, please visit: <http://www.cittaviveka.org/>

We are very fortunate to be able to visit the monastery and are all very much looking forward to it. Please do not hesitate to contact me if you have any queries.

Yours faithfully



Mr. Mark Yapp



STUDENT NAME TUTOR

TO BE RETURNED TOMr Yapp

PARENTAL CONSENT FORM (for children and young people under the age of 18)			
Event: Buddhist Monastery Trip		Date: Tuesday 30 th April 2024	
Student Name:			
MEDICAL / EMERGENCY CONTACT INFORMATION			
PRIMARY EMERGENCY CONTACT DETAILS		ALTERNATIVE EMERGENCY CONTACT DETAILS	
Name of contact:		Name of contact:	
Contact telephone number:		Contact telephone number:	
Relationship to student:		Relationship to student:	
STUDENT'S MEDICAL INFORMATION			
Please provide detail of all medical conditions and illnesses and any treatments required to maintain health and are significant to this trip			
Asthma or bronchitis	YES / NO	Allergies to any known medication	YES / NO
Heart condition	YES / NO	Any other allergies, e.g. material, food, plasters	YES / NO
Fits, fainting or blackouts	YES / NO	Other illness or disability	YES / NO
Severe headaches	YES / NO	Travel sickness	YES / NO
Diabetes	YES / NO	Regular medication	YES / NO
Allergy Treatment - Anaphylaxis	YES / NO	Allergy Treatment - Histamine	YES / NO
If the answer to any of these questions is YES, please give details:			
TRIP PAYMENT - All trip payments are to be made using WisePay			
I have paid using WisePay and my reference number is			
CONSENT DECLARATION			
I have received full details of the event, am satisfied with the arrangements and give consent for my child to take part in the proposed event.			YES / NO
I give consent for him/her to receive emergency medical treatment, including anaesthetic, as considered necessary by any medical doctor present, should the need arise. I have provided detail of all medical conditions and illnesses and any treatments required to maintain health. I give consent for the members of staff to act 'en loco parentis' for the duration of the trip.			YES / NO
I give consent for my child to be photographed during the event and for these photographs to be used in school media.			YES / NO
Any other information that may affect the safety of my child or any other persons and/or the organisation of the event has been provided to the organiser.			YES / NO
Signed:		Print Name:	Date: