**Oxfordshire Outdoor Learning Service**

Date received

**Visit Notification Form**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Establishment name and address** |  | | | | | | |
| **Visit Leader information** | Name  Position  Contact | | | **Visit specific experience of visit leader** | | | |
| **Date(s) of visit** |  | | | | | | |
| **Nature / purpose of visit**  **(aims / benefits)** |  | | | | | | |
| **Provider** |  | | |  | | | |
| **Venue** |  | | | Venue contact number | | | |
| **Accommodation** |  | | | Accommodation contact number | | | |
| **Transport provider**  **(Include out of hours)** | Name | | | Company Contact number | | | |
| **Insurance**  Suitable and sufficient insurance in place to cover visit | Name of Insurance company | | | | | | |
| **Numbers involved in the visit** | Assistants incl volunteers |  | Young people / children | |  | TOTAL  Incl Leader |  |
| **Emergency contact number(s)**  **Please ensure names are legible and provide relevant contact numbers, including mobiles as necessary** | Establishment  Name  Position | | | Contact No | | | |
| Out of hours  Name  Position | | | Contact No | | | |
| **Authorisations**  These signatures must be in place before the form is submitted. Electronic versions are acceptable | The above visit has been approved and will be run in accordance with LA and establishment guidance and policy requirements | | | | | | |
| EVC  Name  Signature Date | | | | | | |
| Head / Manager  Name  Signature Date | | | | | | |

Please send copies via email to Nick Rose at [educational.visits@oxfordshire.gov.uk](mailto:educational.visits@oxfordshire.gov.uk) and insurance (if using OCC insurance) [insurance@oxfordshire.gov.uk](mailto:insurance@oxfordshire.gov.uk)

**Oxfordshire Outdoor Learning Service**

**Visit Notification Form**

If your visit is:

* overseas (day or residential)
* within the remit of Adventure Activities Licensing
* in a more remote / demanding setting
* significant water

then you should complete the Visit Notification Form and return it to:

[educational.visits@oxfordshire.gov.uk](mailto:educational.visits@oxfordshire.gov.uk)

If using LA insurance to [insurance@oxfordshire.gov.uk](mailto:insurance@oxfordshire.gov.uk)

**What does submitting this form do?**

In the event of a serious incident, the LA, as your employer, will need to put in place support for the establishment, those involved and parents / relatives. To do this the LA needs to have access to essential visit information so that it can act quickly and efficiently.

**What are the timescales?**

The timescales are set out so that they can be easily met. It is not expected that these cause an additional administrative burden and they should all fall within good visit planning principles. They are set as minimum times for notification

* UK venues 4 weeks
* Eurozone visits 12 weeks
* Other overseas visits 24 weeks

Please note that failure to meet these timeframes may result in the inability of the LA to provide appropriate cover for your visit.

**Who will approve the visit?**

You should seek approval from both of the following:

* Your Head / Manager
* Your EVC

Please note that without these signatures in place this visit will not be supported.

**Who is the Visit Leader?**

This person should:

* be competent and approved to manage the visit
* hold the substantive responsibility for its delivery
* work within LA and establishment guidance and policy.

**Signatures**

Electronic signatures are acceptable