

KH/LB/TM/WhitemoorChangeofDate

5th October 2026

Dear Parents/ Carer,

Year 7 Whitemoor Lakes Residential – Change of Dates



Barr Beacon School

www.barrbeaconschool.co.uk

We are writing to inform you of an important change to the dates for the upcoming Year 7 residential trip to Whitemoor Lakes Residential Centre. **The residential will now take place from Monday 30th November to Wednesday 2nd December 2026, instead of the previously communicated dates of Monday 25th January to Wednesday 27th January 2027.** This change of dates is beyond our control and we apologise for any difficulty that this may cause.

Our parent information session will be held at Settling in Evening this Thursday, where we will go through all key information and answer any questions you may have. To help you prepare in advance for the trip Whitemoor Lakes provides the following kit list as guidance. <https://bit.ly/49MKDng>

Headscarves and Turbans: If your child wears a turban or headscarf and cannot place a helmet over this, we will require you to complete the following disclaimer if you wish them to take part in an activity without removing their head covering: <https://bit.ly/3BxFSRA>

If you have not completed your child's consent form / turban/ headscarf disclaimer please can this be completed as a matter of urgency and returned to pupil services, no later than 8th October 2026. As a reminder your final payment is due by 31st October 2026.

If you have any questions, please contact us via postbox@barrbeaconschool.co.uk. We are looking forward to embarking on this adventure with our Year 7 pupils and creating memories that will last a lifetime.

Thank you for your continued support and cooperation

Yours sincerely,

Mrs K Hibbs
Headteacher



Barr Beacon School
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Barr Beacon School



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WHITEMOOR LAKES – YEAR 7 RESIDENTIAL
Consent slip must be returned to reception no later than
28th September 2026.

I give permission for my child _____ to take part in the residential visit to Whitemoor Lakes from 25th – 27th January 2027.

Please tick or cross below as required (or write N/A if not relevant).

- I agree that all contact details and medical details that the school holds for my child are accurate and up to date. (If they are not, please contact House Office at the earliest opportunity).
- I have completed the Turban/Headscarf disclaimer if required and provided it with the consent form.
- I understand that all payments, at all stages, including the deposit, **are non-refundable.**

Dietary requirements Please tick here if you require:

- Halal
- Vegetarian

Allergy (Please state which allergy) _____

Medication

- I will require my child to have medication on this trip and will provide the completed medication form before the trip.

What medication will be required: _____

- I do not require my child to have any medication on this trip.

Signed: _____

Print name: _____

Date: _____



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