

## JOURNEY PLAN

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Date	
Destination	
Route	
Pupil names	
Adult names	
Time of return	
Mobile phone number	

### Check list

- First aid kit/medication
- Warm clothes/water -proofs/group shelter
- Drinks/snacks
- Toilet strategy
- Jotters/pencils/cameras/maps/books
- Copies of Risk Assessment & Journey Plan to office