

30 March 2011

Dear Parents

Year 11 Visit to Thorpe Park on Wednesday 29 June 2011

To celebrate the end of exams, we would like to take the Year 11's to Thorpe Park on Wednesday 29 June. The coach will leave Portsmouth Grammar School at 9.00 am and pupils will be required to meet at the main school arch in order to be registered. I anticipate leaving the park at 4.00 pm, so we should arrive back at PGS at approximately 6.00pm.

The cost of the trip, which will include transport and entry into the park which will be £35. We will need a minimum of 40 pupils to make this a viable trip.

Pupils should dress in casual clothes and bring a small amount of money for lunch. Please be aware that this is an official school trip and all pupils will be expected to behave accordingly.

Please complete the slip below together with the consent form and return it to me by **Tuesday 3 May** stating whether or not you will be collecting your son/daughter from school.

Yours sincerely

Rebecca Nash



To: Rebecca Nash, The Portsmouth Grammar School (**return by Tuesday 3 May**)

Year 11 Visit to Thorpe Park on Wednesday 29 June 2011

Pupil Name _____ Tutor _____

I enclose a cheque for £35 (made payable to The Portsmouth Grammar School) for the trip to Thorpe Park on 29 June 2011

*I will be collecting my son/daughter from PGS/*I will not be collecting my son/daughter from PGS. (*Please delete as appropriate)

Parents email address _____

Signed _____ Date _____
(Parent/Guardian)

Parental Consent and Information Form

This completed consent/information form must be with the Trip Leader by the date specified in the covering letter, otherwise the pupil will be unable to be included in the party.

Title of Trip:	Year 11 Visit to Thorpe Park	Date:	Wednesday 29 June 2011
Pupil Details			
Pupil's full name:		Date of birth:	
Home address and contact address (if different):			
In an emergency I can be contacted as follows:	Home Tel:		Work Tel:
	Mobile:		email
If not available, please contact the following person:		Tel:	

Medical Information: Please tick Yes or No for each question and give details for each 'Yes'			
Does your child:	NO	YES	DETAILS
suffer from any allergy to food, medication, fur, bee sting etc.?			
currently receive treatment for or take any medication for or suffer from any medical condition?			
carry an inhaler, epipen, insulin kit or other? If yes, please ensure that a second labelled inhaler, epipen etc. is given to the Trip Leader for safe keeping.			
have any special dietary requirements?			
suffer from vertigo (fear of heights)?			
suffer from travel or motion sickness?			
Is there any physical activity your child may not participate in?			

Please Turnover

		NO	YES	DETAILS
Has your child had any recent illness or injury? If yes, please give details of what and when.				
Has your child had a tetanus injection in the last 10 years?				
Contact details for doctor: Name:	Address:		Tel:	
Please add any additional information you may consider the school should know. Please feel free to contact the Trip Leader if you would like to discuss particular needs more fully.				
Please ensure that you inform the Trip Leader of any changes to this information before the start of the trip.				
Conduct during the Trip				
<p>Pupils are expected to obey instructions given by the staff of any establishment visited, and activity instructors, as well as teachers. Normal school rules apply. In the very unlikely event that a pupil fails to comply, staff reserve the right to remove a pupil from a trip and make arrangements for their return home at parents' expense. In this situation no refund of trip fees would be payable.</p> <p>Pupils are expected to take responsibility of all belongings, especially valuables, in accordance with arrangements specific to the trip. These are not covered by the school insurance policy.</p>				
Consent Declaration				
<p>I, being the parent/guardian of the child named at the head of this form, give consent for him/her to attend the proposed activity.</p> <p>I have read and understood the expected code of conduct and agree that my son or daughter will abide by these instructions.</p> <p>I realise that in some cases the activities offered have some risk involved which may be of a type not encountered during normal life and that this risk whilst small, cannot be eliminated without making the activity pointless. Portsmouth Grammar School has done its utmost to minimise and manage these risks.</p> <p>I give consent for him/her to receive emergency medical treatment, including anaesthetic and/or blood transfusion, as considered necessary by any medical doctor present, should the need arise. I have informed the school of all medical conditions or treatments that he/she suffers from or requires to maintain health. I agree to inform the group leader of any change in medical condition.</p> <p>I am aware that the school has a detailed policy on the safe running of educational visits, which can viewed on the school website.</p> <p>Name: _____</p> <p>Signature and date: _____</p> <p>Relationship to child: _____</p> <p>Please return the signed form to the Trip Leader</p>				