



Aspire, Endeavour, Achieve

May 2018

Dear Parent/Carer

Re: Planned trip to: Thorpe Park Date: Wednesday 18<sup>th</sup> July

As part of our commitment to enrich the lives of our students, Mark Hall Academy are planning to run a visit to **Thorpe Park** on **Wednesday 18**<sup>th</sup> **July** from **8.00am to 7.00pm** as part of our Enrichment Week.

The trip is open to all students in year 10 who meet the criteria indicated below:

- 100% attendance between the issue of this letter and 18th July 2018
- 100% punctuality between the issue of this letter and 18<sup>th</sup> July 2018
- Zero behaviour points between issue of the letter and 18<sup>th</sup> July 2018
- Positive conduct points

The Academy reserve the right to remove your child from the trip at any point which will mean that paid monies cannot be returned and their attendance on future trips may be at jeopardy.

An outline of the **proposed itinerary** for the visit is as follows:

- Register in the WEST HALL at 8.00am. Students will arrive in their own, appropriate clothing. Students will leave the Academy at 8.15am travelling by coach to arrive at Thorpe Park for a 10am.
- Students will be advised to bring a packed lunch for the day and/or money to purchase food and drinks.
- Students will be registered on arrival at a designated meeting area and will need to return to this area at lunchtime and again at the end of the day. They will move around the park in groups of at least 3 at all times.
- 5.00pm depart from Thorpe Park with an approximate arrival back to the Academy at 7.00pm.

The **price** of the trip will be £31.00 which includes your child's entrance fee and travel; for students with annual passes the cost of travel only will be £11.00. Payment must be made through 'School Money'.

If your child is registered with the academy for Free School Meals, we may be able to offer assistance with the cost of the trip. (Please tick the FSM box on the attached consent form).

If you would like your child to take part in this trip we ask for the full payment to reach us no later than: **Friday 15th June 2018.** 

Please complete the attached consent form and medical information and return to Mr Stockdale.

If you have any further questions or concerns, please do not hesitate to contact me.

Yours faithfully

Mr Stockdale

Year 10 & 11 Progress Leader







## CONSENT OF PARENT OR GUARDIAN FOR YOUNG PERSON'S PARTICIPATION IN ORGANISED EDUCATION/RECREATIONAL VISIT

Re: Year 10 Thorpe Park rewards trip Date: Wednesday 18<sup>th</sup> July 2018

I apply to you for a place on this visit, the details of which have been received and noted by me, for my son/daughter/ward	
	(Full Name of student)
1.	<b>a</b> . I understand that there may be limited places available and that a reserve list will be implemented if the visit is oversubscribed.
	<b>b.</b> To pay the balance of monies owed for the trip to you on time according to the deadlines outlined in your letter
2.	<ul> <li>I understand that the payment or any part of it may not be returnable unless:</li> <li>a. I cancel the place before you incur any expenses or enter into any commitments, or</li> <li>b. The academy cancels the visit for any reason and some money remains after meeting all expenses and commitments.</li> </ul>
<b>3.</b> I accept that my child must comply with academy attendance and behavior, policies and if they are withdrawn from the visit at any time prior to the trip taking place on grounds of poor behavior, or attendance, I may not receive a refund if monies have already been paid to a third party provider in compliance with their terms and conditions.	
<b>4.</b> I also agree to members of staff during the course of the visit to approve such medical treatment for my child as is deemed necessary in an emergency on the advice of a qualified medical practitioner. <u>I set out below any medical condition from which my child is suffering, together</u> with details of the treatment required.	
5. I also attach details of special dietary requirements due to medical, religious or moral reasons.	
<b>6</b> . I understand and accept that the activities in this visit will involve an element of risk. I agree and consent to my child taking part in the activities which have previously been explained to me.	
7. I agree/disagree to my child being photographed and the photos being displayed on the school website, notice board, in the local press or Mark Hall Newsletter and Twitter feed.	
Sigr	ned: (Parent/Carer)
Full	name of Student:
Eme	ergency Contact Number:
MEDICAL DETAILS WE OUGHT TO KNOW and SPECIAL DIET REQUIREMENTS?	

My child is registered with Mark Hall Academy for Free School Meals: \*YES/NO (delete as necessary)