



Headteacher: Mrs L Ayling BA (Hons) NPQH

September 2017

Dear Parent/Carer

**Educational Visit
GCSE Geography Liverpool City Centre
Tuesday October 3 2017**

As part of your daughter's GCSE Geography course we have organised an exciting field excursion to Liverpool city centre. We have organised this trip because a large part of the first year 11 unit revolves around the study of a large UK city. Your daughter will be researching the growth and development of the city centre with particular focus on employment, transport, urban redevelopment and issues around dereliction and decay. We will travel to Liverpool by coach and the cost of this is **£7 per student**. This amount can be paid either in person at our finance office or by our online payment facility, ParentMail. This is a voluntary contribution, however, the trip cannot run without these funds. Students may bring spending money with them (£5 maximum), although this is not essential. All necessary risk assessments have been carried out and your daughter will be closely supervised at all times. **The deadline for payment and return of permission slips is 9am Monday 2 October.** Reply slips received after this time will unfortunately be returned and students will not be able to attend.

The aim of the field trip is to collect primary data and to gain real world experience of some of the themes and topics that your daughter will study at GCSE level. Students are not required to wear uniform but must dress in a suitable and appropriate manner. The students will be required to walk some distance around the city centre, therefore appropriate footwear is essential. I would advise that all parents keep informed as to the weather situation and if necessary make sure that your daughter has wet weather clothing.

If your daughter uses any form of daily medicine (e.g. inhaler) could you please ensure that she brings this with her and indicate on the attached reply slip.

Students may bring a packed lunch or purchase food in Liverpool. If your child is in receipt of free school meals the school will provide a packed lunch should one be requested. Please indicate if a lunch is required on the reply slip.

Nothing less than outstanding behaviour is expected of students from Prenton High School; students must follow the instructions of staff whilst on the visit, staying within the boundaries set and adhering to our code of conduct.

If you have any questions regarding the field trip please do not hesitate to contact me via the school office. In the meantime, please complete the enclosed consent slip and return it to school as soon as possible.

Yours faithfully

Daniel Major
Subject Leader Humanities

PARENT/CARER CONSENT FORM FOR EDUCATIONAL VISITS

YEAR 11 GCSE GEOGRAPHY FIELD TRIP TO LIVERPOOL

Date: Tuesday October 3 2017

I agree to my daughter _____ of form _____ taking part in the above mentioned visit and having read the information sheet, agree to her participation in all of the activities described. I acknowledge the need for obedience and responsible behaviour on her part.

I understand that the teacher in charge of the party will be acting *in loco parentis* and in the event of an accident I agree to my daughter receiving emergency medical treatment, which might include the use of anaesthetic and blood transfusions, as considered necessary by the medical authorities present.

I understand that Prenton High School for Girls is insured in respect of its legal liabilities only and that there is no personal accident, or other cover, unless I have been advised specifically by the organiser. Accidents may therefore arise for which Prenton High School for Girls is not responsible. Parents may wish to obtain suitable insurance to cover such eventualities.

I enclose the voluntary contribution of £7 towards the cost of transport.

My daughter is in receipt of free school meals and will require a packed lunch

Any dietary information: _____

My daughter requires the following medication: _____

Signature: _____ (Parents)

Students Name: _____

Date: _____

Contact Telephone No: _____

Contact Telephone No: _____

PLEASE ENSURE THAT YOUR DAUGHTER/WARD BRINGS WITH HER ANY RELEVANT MEDICAL INFORMATION AND CONTACT NUMBERS

By signing this letter, I am confirming that I have parental responsibility for the child named.