

Headteacher: Mrs L Ayling BA (Hons) NPQH

November 2017

Dear Parent/Carer

Visit to Unilever - Bright Futures Project

Unilever has invited the school to take a group of Year 9 students to visit its Research & Development site, Port Sunlight to take part in the Unilever Bright Futures Project. This exciting event will take place on **Wednesday 15 November 2017.**

During the visit, students will work with Unilever staff to develop an ongoing project looking at real world problems from a STEM point of view. All transport and teaching will be provided by Unilever and your daughter will be accompanied by members of staff from Prenton High School.

The School Minibus will transport us to and from Unilever leaving school at 8.45am and returning to school before 3:30pm. Lunch will be provided by Unilever at the venue.

If you would like your daughter to take part in this exciting opportunity, please complete the attached reply slip and return it by **13 November 2017.**

Yours faithfully

Mr C Morrish Teacher of Science

PARENT/CARER CONSENT FORM FOR EDUCATIONAL VISITS

Visit to: Visit to Unilever Research & Development, Port S	unlight		
Dates: Wednesday 15 November 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 to any 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 Schoo may wish to obtain suitable insurance to cover such eventu	l for Girls is not responsible. Parents/Carers alities.
		Parent/carer sign:	Print:
Student's Name:	Form:		
Date:			
Contact Telephone No:			
Contact Telephone No:			
By signing this letter, I am confirming that I have pare	ental responsibility for the child named.		
Does your daughter have any dietary in the second se	requirements? *Yes/No lease provide details below:		
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PLEASE ENSURE THAT YOUR DAUGHTER BRINGS WITH HER ANY RELEVANT MEDICAL INFORMATION AND CONTACT NUMBERS