



Headteacher: Mrs L Ayling BA (Hons) NPQH

June 2018

Dear Parent/Carer

Everton in the Community Enterprise Project

The dates for the off- site activities at Goodison Park have been finalised and are as follows:

- Wednesday 6 June Leave school at 11.15am and return for 3.30pm
- Wednesday 27 June Leave school at 9.30am and return for 3.30pm
- Wednesday 18 July Leave school at 11.00am and return for 3.30pm

The group will travel by minibus and will be accompanied at all times by a member of staff from Prenton. Students must wear school uniform and take a packed lunch with them. If your daughter is in receipt of free school meals, school can provide a packed lunch; please indicate on the attached reply slip if you would like this option.

If you would like your daughter to take part in this exciting event, please complete the attached permission slip and return to me at school.

Yours faithfully

Ms C Craven
Year 10 Progress Leader

PARENT/CARER CONSENT FORM FOR EDUCATIONAL VISITS

Visit to: Goodison Park

Dates: Wednesday 6 & 27 June, Wednesday 18 July

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 School for Girls is not responsible. Parents/Carers may wish to obtain suitable insurance to cover such eventualities.

Parent/carer sign: _____ **Print:** _____

Pupils Name: _____ **Form:** _____

Date: _____

Contact Telephone No: _____

Contact Telephone No: _____

- My daughter is eligible for free school meals and would like a lunch provided; she has no dietary requirements
- My daughter is eligible for free school meals and would like a lunch provided; she has the following dietary requirements:

PLEASE ENSURE THAT YOUR DAUGHTER 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.