



12 January 2010

Dear Parent/Guardian

I do hope that you have had a relaxing and enjoyable holiday season. It is my pleasure to write to you confirming that the proposed First World War Battlefields trip to France and Belgium will go ahead as planned.

I can confirm that dates for the trip are from the 26th March (the last day of this term) until the 30th March, when we are due to arrive back at school at around 10AM. I will write to you again to invite you to an information evening before the trip goes but can I ask now for the final payment in order that I can confirm all bookings for our trip.

In the initial letter I approximated the cost of the trip at £330. I am pleased to say that the final cost of £358 is not too far removed from that and for the extra £28 the students now have all meals paid for up front (including a multi-course buffet on the ferry both ways), thus limiting the amount of pocket money needed whilst abroad.

Can I thank you for your payment of the first deposit and now ask that you forward a cheque (made payable to *Pocklington School*) or cash for the sum of £258 before the 20th January. No further payments would then be required.

I have also included a Parental Consent Form for you to fill in; this is a school standard document which provides us with all the information we require in terms of medical and dietary needs.

Finally, could I ask you to check that your son/daughter's passport is valid and has at least 6 months to run after our return from the trip? If your son/daughter does not currently own a passport, could I ask that you apply for one as a matter of urgency as I will soon require passports to complete documentation?

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

Yours sincerely

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Head of History

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EV3 Parental consent for a school visit

School group:

1. Details of visit to: France/Belgium History Trip

From: 26/03/10

Date/time: 3PM

To: 30/03/10

Date/time: 10AM

I agree to -

taking part in this visit.

2. Medical information about your child:

a. Any conditions requiring medical treatment, including medication?

yes/no

If yes, give brief details:

b. Outline any special dietary requirements of your child and the type of pain/flu relief medication your child may be given if necessary:

For residential visits and exchanges only

c. To the best of your knowledge, has your son/daughter been in contact with any contagious or infectious diseases or suffered from anything in the last four weeks that may be contagious or infectious?

yes/no

If yes, please give brief details:

d. Is your son/daughter allergic to any medication?

yes/no

If yes, please specify:



e. When did your son/daughter last have a tetanus injection?

I will inform the group leader/ Director of Activities as soon as possible of any changes in the medical or other circumstances between now and the commencement of the journey.

3. Declaration

I agree to my son/daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.

It is important that you read and understand the extent and limitations of the insurance cover before signing this agreement. Your school should have provided you with details about insurance cover with this consent form.

Contact telephone numbers:

Work:

Home:

Home address:

Alternative emergency contact:

Name:

Telephone number:

Address:

Name of family doctor:

Telephone number:

Address:

Signed:

Date:

Full name (capitals):
