

RWC/avt
29 September 2017

Dear Parent(s) / Carer(s)

Trip No: 4036 - Optional Trip during term time to Lowewood Museum, Hoddesdon on 31st October 2017, 6th November 2017 and 17th November 2017 – Year 8 (named students only)

I am writing to advise you that your child has been nominated to take part in a trip to the Lowewood Museum.

Takeover Day is an annual day on which museums, galleries and historic homes invite students in and give them a meaningful role. Students are in charge, making decisions and participating fully in the life of the museum. The students have a say and contribute to the work of the museum. Takeover Day in Museums is part the Children's Commissioner's Takeover Day which happens all over the country each November. The museum Takeover Day will form a programme of three days – two preparation days, and the takeover day itself.

On this occasion the school will be funding the cost of this trip.

Please complete the [consent form on our website by following this link](#) or return the slip attached to this letter. Please note that all trips will be allocated on a first-come, first-serve basis and we would therefore recommend that you respond as soon as possible.

Please be aware that the school reserve the right to refuse a place on this trip for any pupil whose attendance falls below the acceptable level and/or their behaviour has been a cause for concern. In line with our School Trips Policy, if there is a need to contact your child while they are out of school, please phone Mrs Sally Pringle on 07938 225451 or Mr Oliver Price on 07925019743.

Yours faithfully

Mrs V Winslow
Deputy Head of Lower School

Mrs S Pringle
Bursar

Encl.

Reply Slip

Trip No:4036 - Optional trip during term time to Lowewood Museum, Hoddesdon on 31st October 2017, 6th November and 17th November 2017 – Year 8 (named students only) (VMW)

If you wish to complete this reply slip electronically, then please complete the [consent form on our website by following this link](#)

Pupil's Name: _____ **Form:** _____

I agree to my child taking part in the above mentioned visit and to their participation in the activities to be undertaken during the day. I support the need for obedience and responsible behaviour on their part.

Declaration

To the best of my knowledge, my child is not suffering from any medical condition that makes them unfit to participate in this visit. I agree to my child receiving medical treatment as considered necessary by the medical authorities present.

Medical conditions that we should be aware of:

Please provide us with two emergency contact phone numbers:

Daytime:

Mobile:

Payment Method – FREE TRIP

Signed: _____ **Date:** _____
Parent / Carer