



Dear Parents/Carers

11 September 2019

## Year 11 – Curious Incident – National Theatre Studio, SE1 8LL – 7<sup>th</sup> November 2019

On **Thursday 7<sup>th</sup> November 2019** we have planned a visit to The National Theatre to watch a recording of *The Curious Incident of the Dog in the Night-Time*. This trip will support work on this text, which they are studying for GCSE English Literature.

Students do need to wear school uniform and they should bring a packed lunch, water bottle, and a waterproof coat or sun cream depending on the weather forecast.

The coach will depart from school at **08:45** (please register outside room 40). The coaches will return to school at **16:30pm** (traffic permitting, we will update you if necessary).

The voluntary contribution for the trip will be **£24.50**. Should the numbers fall below the required figure then there will either be an increase in the cost or if there is insufficient interest, the trip will not take place.

Online payment is preferred and should be made by going to The Piggott School website and clicking on the 'Parents' tab. You then need to choose the 'online payments/purchasing' SCOpay option. Payment can also be made by cheque, payable to The Piggott School, with your child's name, tutor group and trip name written clearly on the back.

Pupils in receipt of free school meals are eligible for funding on this visit. If your son/daughter is in receipt of pupil premium, the school may be able to support with the funding of the trip should you require financial assistance. Please contact me for further details.

If you would like your child to take part in this trip we will need confirmation of your consent by **Monday 30<sup>th</sup> September**. This can be easily provided online in the SCOpay website or app as part of the online payment process. Alternatively, *if you are not using the online payment system*, the generic consent form overleaf should be completed and dropped in the Trips Postbox in Reception instead.

Details of any medical conditions that may affect your child's performance or safety on this trip and/or any changes to the medical/dietary/contact information we hold at school should be emailed to [medical@piggottschool.org](mailto:medical@piggottschool.org). **In your email please clearly state the name of your child, their tutor group and the name of the trip.**

Should you have any further questions please do not hesitate to contact me on the school telephone number or email me at the address below.

Yours sincerely,

**Ms Marriott**

**Teacher of English**

[marriottk@piggottschool.org](mailto:marriottk@piggottschool.org)



## Trip Consent Form

*Completed forms should be handed in to the Trips Postbox in RECEPTION*

**\*\* NB: Do not return this form if providing consent online via the SCOPay payment system \*\***

**Insert trip name:** .....Curious Incident..... **Trip date:** 7th Nov 2019

**Student's Name:** ..... **Tutor Group:** .....

I confirm that I have received the letter about the trip named above and I give permission for my child to take part.

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I enclose a cheque (made payable to The Piggott School) for **£24.50**. I have written my child's name, tutor group and the trip name on the back of the cheque.

**OR**, I wish to request financial assistance. I have sent an email to [trips@piggottschool.org](mailto:trips@piggottschool.org) outlining the reason (eg. FSM, PP, other extenuating circumstances).

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I confirm that the medical/dietary information held at school is correct **and** that my child has no medical conditions that might affect their performance or safety on this trip,

**OR**, I have given details of any new medical/dietary information that the school is unaware of and any medical conditions that might affect my child's performance or safety on this trip, by emailing [medical@piggottschool.org](mailto:medical@piggottschool.org). **In your email please clearly state the name of your child, their tutor group and the name of the trip.**

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**If there are any changes to my child's fitness / medical / dietary conditions between now and the time of the trip, I will inform the school by emailing [medical@piggottschool.org](mailto:medical@piggottschool.org).**

I agree to staff giving permission for any emergency treatment that the medical authorities deem necessary.

**Please contact the school if your emergency contact details for the duration of the trip will be different to those already held by the school.**

**Name of Parent /Carer** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signed** \_\_\_\_\_ **(Parent/Carer)**

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