

May 2017

Dear Parent/Carer

I would like to invite your child to visit the Galleries of Justice on Saturday 27 May 2017 from 9.45am to 2.00pm. This is a crime and punishment museum in Nottingham and covers many aspects that your child has studied for their GCSE History. This day will be a really useful way for students to consolidate their revision and prepare for the upcoming exam. The day will include a workshop on crime and punishment through time, including a guided tour of the museum.

The cost of this trip is £9.00 per student. To keep costs low students will need to make their own way to and from the venue. We will meet outside the museum at 9.45am and students will be free to leave or be collected at 2.00pm. Please complete the slip below, indicating if your child will be collected from the museum or making their own way home.

Please note that there are only 35 places available for this trip and these will be allocated on a first come first served basis.

Students do not need to wear school uniform but will need to bring a packed lunch or money to purchase lunch in the cafeteria. **Please be aware that we have students who may be participating in this trip who have a serious nut allergy. Please avoid giving your son/daughter bagged nuts or products with a nut content, as even the smell can cause these students anxiety.**

If you would like your child to attend this trip, our preferred method of payment is via ParentPay. If you choose this option you do not need to complete the attached Parental Consent Form. If you wish to pay by cheque please complete, sign and return the attached Parental Consent Form and send it, together with your payment, to Student Reception by no later than Friday 19 May 2017, placing it in a sealed envelope with your child's name, tutor group and the name of the trip on the front. Please make cheques payable to Heanor Gate Science College.

I would also like to draw your attention to some additional revision opportunities for students:-

- Revision sessions will continue to run on Fridays at 3.00pm in room J2
- Wednesday 31 May 2017 (half term) at 12noon in room J2
- Monday 5 June 2017 at 8.00am in room J5 (morning before the first exam)

Yours sincerely

C Harris
History Teacher

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Please return to Student Reception – Galleries of Justice, Nottingham – Saturday 27 May 2017

Name of student

RG

My child will be collected at 2.00pm from the above venue ✓

My child will be making their own way home from the above venue ✓

Signed
(Parent/Carer)

Date



**HEANOR GATE SCIENCE COLLEGE
TRIP CONSENT, CONTACT
AND MEDICAL FORM**



Please complete and return to Student Reception
PLEASE COMPLETE ALL SECTIONS

Student's name				RG	
Trip / Visit to	Galleries of Justice, Nottingham				
Cost	£9.00	Cash/Cheque	<input type="checkbox"/>	ParentPay →	<i>If you pay via ParentPay you do not need to complete this form</i>
Date(s) From	Saturday 27 May 2017		Teacher in charge	C Harris	
Times	Meeting at the venue at 9.45am, leaving the venue at 2.00pm				

Student Contact Details

Home address			
Contact telephone numbers (for the duration of the visit / trip)			
Name		Home	
Mobile		Work	
Email			

Alternative contact	Relationship to student:		
Address			
Name		Home	
Mobile		Work	

Medical Information

Name of doctor		Tel no	
Address of surgery			

Please mark with X if appropriate :

My child does not suffer from any medical condition requiring regular treatment.	
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My child suffers from (e.g. asthma)			
and has been prescribed the following medication	Name of medication	Dose	Frequency

NB: if your child is on a residential visit, please ensure you include information relevant to night-time needs

My child also uses the following over-the-counter medication	Name of medication	Dose	Frequency

My child has an allergy to the following	Allergic to	Type of reaction

Please delete as appropriate

I would like to discuss my child's medical condition with trip leader	YES NO
My child has an up to date tetanus injection	YES NO
I am willing for my child to be given "over-the-counter medication" by staff e.g. paracetamol, throat lozenges, insect bite antihistamine, travel sickness tablets and sun cream/aftersun if necessary	YES NO

Any medication required should be given to the teacher in charge, clearly marked (in its prescription container if applicable) with name and full instructions for use.

Inhalers and "Epipens" may be kept by the student with spares given to the teacher in charge.

I give authorisation for my child to keep an inhaler with them and use it as required <i>(Please delete as applicable)</i>	YES NO
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Dietary Information

Does your child have any special dietary requirements e.g. vegetarian, kosher, allergies <i>(If Yes, please give details)</i>	YES NO

Additional Information

Please include any additional information as required

Photography/Video - Please tick the box if you DO NOT give permission for your child to be photographed and/or videoed for use in any school publicity material including parent magazine and the school website.	
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Declaration by Parent/Carer (or student if over 18)

1. I agree to my child attending this trip/visit/activity
2. I have read and completed this form and to the best of my knowledge the details given are true and accurate.
3. I agree to my child 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.
4. I will inform the teacher in charge as soon as possible of any changes in the medical or other details between now and the commencement of the visit/trip.

Signature		Date	
Print name			