

9th May 2019

Dear Parents/Carers

Minack Theatre – Ali Baba and the Forty Thieves

On Wednesday 19th June Year 3 will be visiting the Minack Theatre, Penzance to watch a performance of Ali Baba and the Forty Thieves. This is an exciting trip, which has been organised by the Aspire Academy Trust, which all Year 3 children within the Academy Trust will be attending.

We will be leaving school at 10.30 am and will arrive back at approximately 6.00 pm, dependant on traffic. Mrs Kempna, Mrs Hill and 2 other members of staff will escort the children. The Minack Theatre is an outdoor venue so the children will be exposed to the elements **all day**.

Children will need:

- A packed lunch and 2 drinks (children on free school meals will have a packed lunch provided, please order a meal with Mrs Rowe).
- Children **must** have a sunhat and suncream.
- School jumpers must be worn and a lightweight coat that can be stored in their back pack.
- A small cushion or mat to sit on

The cost of the trip will be £7.00 per child which will include and a tub of Roskilly's vanilla ice cream, payment can be made through Parentpay. Please complete the consent form attached (or the online consent assessible via ParentPay) and return it to school by **Wednesday 22nd May** if you are willing for your child to attend this trip.

Thank you for your support.

Mrs Cocks/Mrs Kempna
Year 3 Class Teacher

BUGLE CP SCHOOL

PARENTAL CONSENT FORM

This form has been produced for parents/guardians of young people to complete with regard to visits and journeys and gives the necessary authority to the school to take your child on the visit. PLEASE NOTE that in signing this form your rights are not affected in any way.

School Bugle School
Visit/Activity Ali Baba and the Forty Thieves
Date Wednesday 19th June 2019

I wish my son/daughter
to be allowed to take part in the above mentioned visit and, having read the information provided, agree to him/her taking part in the activities described.

1. I consent to any emergency medical treatment required by my child during the course of the visit.
2. I confirm that my child does not suffer from any medical condition requiring regular treatment **OR** my child suffers from
requiring regular treatment (eg diabetes, asthma). **(Delete as appropriate).**
If your child suffers from a particular complaint, please enclose a letter giving details of the complaint and its treatment.
3. I consent to my child travelling by minibus.

Signature of Parent/Guardian Date

Name of Parent/Guardian

Address

.....

Tel No Mobile Number

There is in force a policy of insurance in respect of this trip, which provides cover for the matters referred to below.

The Local Authority through its employees and agents will at all times take reasonable care of your child and his/her personal effects and money.

If your child has an accident or suffers loss or damage to his/her personal effects and money which is not as a result of any lack of care on the part of the LA, its employees or agents, the LA will not be able to pay any damages or meet any expenses arising.

Similarly if your child incurs any liability towards a third party in respect, for example, of any injury caused by your child to that third party or damage caused to the third party's property the LA will not be responsible for this unless it can be shown to be at fault in some way.

☐ I consent to my child taking part in the above event.

☐ I/..... will collect my child from Bugle
School at 6.00 pm

Contact Name and Mobile Number:

Signature of Parent/Guardian: Date:

Please return completed slip by Wednesday 22nd May.