

9<sup>th</sup> June 2010

Dear Parent/Guardian

**Re: Science Club Visit to the Science Museum – Tuesday 6<sup>th</sup> July**

Your son/daughter has been selected to go to the Science Museum for a specially prepared day for students in Science Clubs across Hertfordshire. This trip will take place on Tuesday 6<sup>th</sup> July 2010, which is a CED day. They will be taking part in activities organised by the Science Museum staff. We will leave Beaumont by coach at 8:45 am and will return to Beaumont School at 4:30pm. Pupils should wear school uniform and bring a packed lunch.

The cost of this trip will be £12.50. Unfortunately, we are unable to meet these costs from our own funds, and the visit will only be able to go ahead if parents are prepared to make a voluntary contribution of £12.50 to school funds. It is entirely up to you whether you wish to contribute. However, if all parents are not prepared to make this contribution then the visit may not be able to take place for any of the children.

Please complete and return the attached slip together with £12.50 (cheques made payable to Beaumont School) **by no later than Monday 21<sup>st</sup> June**. You should send your money or cheque in a sealed envelope with your son/daughter's name, form and title of the trip clearly written on it. **This should be posted in the appropriate box outside the Finance Office.**

The Science Museum has requested that we seek your permission for them to photograph the children during the activities and to use these photographs on their website. I would be grateful if you could complete the attached form and return it with your reply slip to indicate whether or not you give your permission. If you have any queries, please do not hesitate to contact me.

Yours sincerely

Mr S Lloyd  
Science Club Co-ordinator

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To be returned to the box outside Finance marked 'Science Club Trip' by no later than Monday 21<sup>st</sup> June

Pupil's Name ..... Form .....

I do/do not\* wish my son/daughter to participate in the trip to the Science Museum on 6<sup>th</sup> July

I am/am not\* prepared to make the contribution requested and enclose £12.50 (\*Please delete as applicable)

I agree to his/her taking part in the activities described. I also consent to any emergency medical treatment, including the use of anaesthetics, necessary during the course of the journey. I understand that for the school's insurance policy to cover any pre-existing medical condition, I must provide a letter from my GP stating my son/daughter is fit to travel.

Emergency contact/medical details. Please tick either box A or B.

A  I confirm that all details held by the school on the gold form concerning emergency contact telephone numbers and/or medical conditions affecting my son/daughter are correct, or that I have already notified the school of any changes.

B  Please note the following change(s) to the above details, which is/are  for this visit only  
 permanent.

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Signed ..... Father/Mother/Legal Guardian      Date .....