

March 2024

Dear Parent/Carer,

I am delighted to be able to offer Politics students in both Year 12 and 13 the exciting opportunity to attend a visit to the Foreign Office and Supreme Court in London on **Tuesday 26th March 2024**. The aim of this trip is for students to experience political life within a public office and further their knowledge in line with the Politics A Level Course.

We will depart from school at 7:00am by minibus, and travel to Richmond where we will take the tube to Waterloo Station. We estimate arrival in Richmond at around 9:15am, allowing time to make our way into central London for 10:00am. We will then have a tour and Q&A session in the Foreign Office before stopping for lunch. It is encouraged that students bring money for lunch and perhaps some snacks/drinks for the minibus journey. After a Parliamentary walking tour, we will arrive at the Supreme Court for 2pm for a tour around the three court rooms. We aim to be back at the minibus at around 4:30pm, then drive back to Highcliffe with an estimated arrival time of 6:30pm. This will be dependent on traffic.

The total cost of the trip is **£27.00** which includes minibus transport to London and a travelcard to travel into central London. Payment should be made using the school's on-line Wisepay facility. Please make a note of your Wisepay receipt reference, as you will need to provide this on the attached slip/consent form. Receipts are generated automatically on WisePay and sent to the email address you supply when making the payment.

This will be a valuable experience, which I am sure your child will find of great benefit.

Please could you make the payment on Wisepay, and complete and return the medical form to myself no later than **Tuesday 19th March 2024**.

Yours faithfully



Miss M Roberts
Head of History and Politics



STUDENT NAME TUTOR

TO BE RETURNED TO MISS ROBERTS BY TUESDAY 19TH MARCH 2024

PARENTAL CONSENT FORM (for children and young people under the age of 18)			
Event:		Date:	
Student Name:			
MEDICAL / EMERGENCY CONTACT INFORMATION			
PRIMARY EMERGENCY CONTACT DETAILS		ALTERNATIVE EMERGENCY CONTACT DETAILS	
Name of contact:		Name of contact:	
Contact telephone number:		Contact telephone number:	
Relationship to student:		Relationship to student:	
STUDENT'S MEDICAL INFORMATION			
Please provide detail of all medical conditions and illnesses and any treatments required to maintain health and are significant to this trip			
Asthma or bronchitis	YES / NO	Allergies to any known medication	YES / NO
Heart condition	YES / NO	Any other allergies, e.g. material, food, plasters	YES / NO
Fits, fainting or blackouts	YES / NO	Other illness or disability	YES / NO
Severe headaches	YES / NO	Travel sickness	YES / NO
Diabetes	YES / NO	Regular medication	YES / NO
Allergy Treatment - Anaphylaxis	YES / NO	Allergy Treatment - Histamine	YES / NO
If the answer to any of these questions is YES, please give details:			
TRIP PAYMENT - All trip payments are to be made using WisePay			
I have paid using WisePay and my reference number is			
CONSENT DECLARATION			
I have received full details of the event, am satisfied with the arrangements and give consent for my child to take part in the proposed event.			YES / NO
I give consent for him/her to receive emergency medical treatment, including anaesthetic, as considered necessary by any medical doctor present, should the need arise. I have provided detail of all medical conditions and illnesses and any treatments required to maintain health. I give consent for the members of staff to act 'en loco parentis' for the duration of the trip.			YES / NO
I give consent for my child to be photographed during the event and for these photographs to be used in school media.			YES / NO
Any other information that may affect the safety of my child or any other persons and/or the organisation of the event has been provided to the organiser.			YES / NO
Signed:		Print Name:	Date: