



Saint Benedict
A Catholic Voluntary Academy

Dear Parent/Guardian

Visit to Hardwick Hall by Year 11 History Pupils

I would like to invite your child to take part in our trip to Hardwick Hall in north Derbyshire. As part of the History GCSE we are taking pupils to Hardwick Hall to study the site more closely. As we go around we will be looking and studying at the key features, design and purpose of the Hall. We feel this trip will be invaluable to students in reinforcing some of the key ideas needed to answer the question in the summer.

The date of the visit is **Monday 15th July**. We will be leaving at 9am on the coach and arriving back in time for pupils to catch their normal buses at 3pm. As such we will be on the visit for lunch and pupils are expected to bring their own packed lunch or money to buy something on site at the café, any pupil receiving free school meals will get a packed lunch provided for the trip. As this is a school day pupils will still be expected to wear school uniform on the visit. Mobile phones are allowed on the trip but they are the responsibility of the pupils not school and must be used appropriately, normal school rules apply regarding their confiscation.

To confirm your son/daughters place on the visit we need the attached form completed and payment returned to Mr Tomlinson by Thursday 28th March. If the consent form is not handed in before the trip this will affect your child's ability to participate in the trip. The cost of the visit for coach and entrance is £23. Alternatively, you can pay on SCOPAY but the form still needs to be returned to school.

If you have any questions prior to the visit please do not hesitate to ask either your son/daughters history teacher.

ATomlinson@ben.srscmat.co.uk

GHird@ben.srscmat.co.uk

THayre@ben.srscmat.co.uk

Yours,

History Team at Saint Benedict CVA



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YEAR 11 VISIT TO HARDWICK HALL

PARENTAL CONSENT FORM

Please read the following information carefully before signing and returning the consent form.

Name of Pupil:

.....

Personal Tutor Group:

.....

Name of Emergency
contact:.....

Emergency contact number:

.....

Does your child receive free school meals? **(circle as appropriate)**

Yes No

1. I have read the information about the visit and I agree to my child taking part in the visit.
2. I declare my child to be fit enough to undertake the activities outlined during the visit.
3. My child suffers from the following ailments/allergies: (please give details)

4. My child requires the following medication and I will provide sufficient quantities with instructions for the period of the visit to my child's group leader:

5. I authorise the organiser to act on my behalf in an emergency and to sign on my behalf any consent form required by medical authorities if they know that it would not be advisable to wait for my own signature. I understand in agreeing to this that the party leader will make all reasonable efforts to contact me.

NB: I will inform the school if there are any changes to the information given on this form prior to the visit.

Signed..... (Parent/Guardian)

Date