

St Matthew Academy

St Joseph's Vale, Blackheath, London SE3 0XX

Executive Head: Mr Serge Cefai

Head of School: Ms Miranda Baldwin

6 September 2018



Dear Parents and Carers

Trip to Science Museum

We are pleased to inform you that we have organised a G& T reward trip for pupils who were identified as Gifted and/or Talented in Science at KS3 last academic year.

We will be going to the Science Museum to further pique their fascination, enjoyment and interest in Science. They will have an opportunity to explore the museum's galleries and will be watching a 3D Science Show 'Under the Sea' and taking part in the hands on Wonderlab: The Statoil Gallery.

This is a wonderful opportunity for your child that will enrich his/hers scientific experience.

The details of the trip are as follows:

Departure Date:	Thursday 20 September 2018
Departure Time:	9am from School
Return Time:	3:30pm – 4:00 to School
Travel:	Walking/Train/Tube
Dress:	Full School Uniform
Refreshments:	Packed Lunch required – Children in receipt of Free School Meals will receive a lunch.
Cost:	£5.50

Myself as visit leader and my colleagues will retain the overall pastoral responsibility that we have when in school and which is well established in law. The law requires that teachers do everything reasonably practicable to ensure the safety of everyone in the group, and the staff will use their skills and experience as adults and teachers to protect the health, safety and welfare of the students. A detailed risk-assessment has been carried out, a copy of which is available from the school if you wish to see it.

If you would like your child to take part in this trip, please complete the permission slip and make your payment of £5.50 to your child's Parent Pay account www.parentpay.com by Thursday 13 September 2018

Yours faithfully

Mrs S Kumar
Science teacher
Trip leader

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Trip to Science Museum 20 September 2018

RETURN PERMISSION SLIP TO: **Main Reception or Class Teacher**

I have read the information on this letter and I agree to:

(Name of pupil) in (class/form)taking part in the visit and in the activities described.

I agree to impress upon him/her the necessity to behave responsibly and to help the teachers to ensure the safety of everyone on the visit.

Does your child have any condition or medical treatment requiring special medical attention? **Yes/No**

Give details:

Does he/she have any special dietary requirements? **Yes/No**

Give details:

Does your son/daughter have any allergies? **Yes/No**

Give details:

Contact number 1: Contact number 2:

Emergency contact number:

Declaration:

I confirm that my child is in good health. I agree to inform the group leader of any change in medical condition, and I give consent to any administration of medication as may be considered necessary by medically qualified persons, and any first aid deemed necessary, in an emergency situation during the visit.

Signed: (Parent/guardian) Date: