

9<sup>th</sup> December 2021

Dear Students, Parents & Carers

On behalf of the Expressive Arts Faculty I am really excited to be able to offer you the opportunity to visit London's West End to see two amazing musicals, 'Dear Evan Hansen' and 'Hamilton'!

Our proposed itinerary will be as follows;

Departure:	Coach travel to London leaving at 9.00am on the 15 <sup>th</sup> July 2022.
Food arrangements included:	McDonald's meal, evening meal and breakfast.
Evening performance:	'Dear Evan Hansen' at the Noel Coward Theatre.
Accommodation:	Hotel in Heathrow, more details to follow – one night stay.
Saturday:	Tour & lunch in Covent Garden.
Matinee performance:	'Hamilton' – Victoria Palace Theatre.
Return to school:	Approximately 11pm
Total cost:	£315

**'Dear Evan Hansen'** contains mature themes and viewing is recommended for children 12 and above. Here's a short synopsis; *Evan Hansen is an anxious, isolated high-school student who's aching for understanding and belonging amid the chaos and cruelty of the social media age. He soon embarks on a journey of self-discovery when a letter he wrote for a writing exercise falls into the hands of a grieving couple whose son took his own life.* <https://dearevanhansen.com/london/>

**'Hamilton'** the official website for the theatrical production recommends a viewing age of 10 years. Here's a quick synopsis; *it tells the story of forgotten American Founding Father Alexander Hamilton and his ascent out of poverty and to power against the backdrop of the American War of Independence.* <https://www.delfontmackintosh.co.uk/whats-on/hamilton>

Tickets for both shows are extremely hard to get hold of and I am afraid the travel company can only reserve them for a certain amount of time. Due to this we would need a deposit of £135 by Friday 17<sup>th</sup> December in order to secure our booking.

If you would like your child to take part please complete the attached consent form and make a deposit payment of £135 on ParentPay.

I will write to you after Christmas with further information. In the meantime, if you have any questions please don't hesitate to contact me in school.

Many thanks

Mrs S Gray  
Head of Expressive Arts



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NOTTINGHAM

St Thomas More Catholic Voluntary Academy  
[enquiries@st-thomasmore.derbyshire.sch.uk](mailto:enquiries@st-thomasmore.derbyshire.sch.uk)  
Tel: 01298 23167



**St Ralph  
Sherwin**  
Catholic Multi Academy Trust

**PLEASE RETURN THIS PAGE ONLY TO THE SCHOOL OFFICE**

[In order to comply with Health & Safety Regulations we must receive this completed consent form at least 3 school days prior to the date of the trip. NB. Your child will not be allowed on the trip if you do not comply with this request.]

**Student:** \_\_\_\_\_ **Form:** \_\_\_\_\_

I am willing for my son/ daughter to take part in the trip to London.

I acknowledge the need for my child to behave responsibly.

I understand that all reasonable care will be taken to ensure the safety of those in the party.

**Medical information about my child:**

[a] Any condition requiring medical treatment, including medication? Yes/No [Please circle as appropriate]

Please give brief details below. If your child requires medication, a parental consent Form 5 must be completed.

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When did your child last have a tetanus injection? \_\_\_\_\_

I will inform the Group Leader/Headteacher as soon as possible of any changes in the medical or other circumstances between now and the commencement of the visit.

**Declaration**

I agree to my son/daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.

I understand the extent and limitations of the insurance cover provided and have read the attached letter.

Contact telephone numbers:

Work/mobile \_\_\_\_\_ Home \_\_\_\_\_

Home Address: \_\_\_\_\_

Alternative emergency contact:

Name: \_\_\_\_\_ Telephone number: \_\_\_\_\_

Address: \_\_\_\_\_

Name of family Doctor: \_\_\_\_\_ Telephone number: \_\_\_\_\_

Address: \_\_\_\_\_

**This form or a copy will be taken by the Group Leader on the visit. Full details will be retained by the school contact.**

**I agree to abide by the terms and conditions for educational visits. (Terms and Conditions can be found on the school website [www.st-thomasmore.derbyshire.sch.uk](http://www.st-thomasmore.derbyshire.sch.uk), paper copies are available upon request.)**

Signed \_\_\_\_\_ Date returned \_\_\_\_\_

Full name (capitals): \_\_\_\_\_