

Dear Parents,

### Year 7 visit to watch Cinderella at the Buxton Opera House

This year we are really excited to let you know that we have arranged for our Year 7 pupils to watch Cinderella at Buxton Opera House. The visit will take place on Tuesday 19<sup>th</sup> December 2023.

We will leave school after an early lunch at 12.20 and walk down to the Opera House. The show will finish at approximately 15.15hrs and students will be dismissed from the Opera House.

As we will be walking to the Opera House, please ensure your child is wearing suitable school shoes and a warm waterproof coat. If they wish they may bring a small amount of money to purchase an ice cream or drink during the interval.

The cost of the show is £12.00. To secure your child's place please pay the £12.00 via ParentPay and return the attached slip to school before Friday 3<sup>rd</sup> November 2023.

As representatives of the school, we expect all pupils to behave to our usual high standards. Anyone who we cannot trust to behave well will not be included in the trip.

Please complete and return the attached consent form and make payment via ParentPay by **Friday 3<sup>rd</sup> November 2023**

Yours truly,

Mrs Sarah Lancett  
Acting Head of School

Mrs Lesley Musgrove  
Trips and Visits Co Ordinator

### Cinderella 2023

#### PLEASE RETURN THIS SECTION ONLY TO THE FINANCE OFFICE

[In order to comply with Health & Safety Regulations we must receive this completed consent form by the 3<sup>rd</sup> November 2023. 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 visiting Buxton Opera house.

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.

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 journey.

#### **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.

Emergency contact telephone numbers:

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

Alternative emergency contact:

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

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.**

**£12.00 Payment has been made via ParentPay.**

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

Signed \_\_\_\_\_ Date: \_\_\_\_\_

Full name (capital): \_\_\_\_\_