



HUNGERHILL LANE
EDENTHORPE
DONCASTER
DN3 2JY

TEL: 01302 885811
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Email: admin@hungerhillschool.com

6th June 2018

Dear Parent/ Carer

Your child has shown great dedication to their studies this year and as a result has gained a place on this year's rewards trip. This year your child has achieved over 98% attendance with an average attitude to learning (A to L) score of 3.5 and over which are both fantastic achievements. Here at Hungerhill School we feel it is important to recognise those students who consistently strive, on a daily basis, to do their very best and so I am delighted to offer your child a subsidised place on our annual trip to Lightwater Valley. The total cost of the trip for your child will be a £10; this includes travel to and from the park and park entry fee.

The easiest way to pay is via the parent portal on our website. This allows you to make secure card payments to us directly. A guide on how to set up your parent portal payment account can be found in the 'Parents' section of our school website. Alternatively you can pay by cheque. Cheques should be brought in an envelope with name, form and Lightwater Valley 2018 written both on the back of the cheque and also on the outside of the envelope. Each cheque should be made payable to **Hungerhill School**. It should be handed in to the Finance Office at morning registrations between 8.35 – 8.50 am only. Do not hand in money at other times or give money to Mrs Bamford. The finance office will complete a payment record which we will keep hold of and you will receive a receipt of payments accepted. The deadline for all payments to be with finance is **18th June 2018**.

The trip will take place on **Friday 6th July** and will depart from school at 8.00am (so please be at the bus bay no later than 7.45am) and we aim to arrive back at school at approximately 5.00pm.

Your child will need to bring with them their own lunch or bring money with them to buy lunch. It is also recommended that they bring some money for refreshments, gifts and that they dress appropriately for a theme park trip. This would include comfortable, sturdy footwear and clothing appropriate for the weather we are due to have that day. Please note that any personal belongings your child wishes to bring such as mobile phones etc. are the pupil's responsibility.

Please ensure your child carries with them any medication they may need immediate access to such as inhalers, Epi-pens etc. and I ask that you include any medical information that you feel we need to be aware of on the attached form. If your child is required to take medication throughout the day of the trip you may wish to arrange for them to meet with a member of staff at set times to administer the medication if you feel your child is unable to correctly / safely take medication unsupervised.

Please fill in and return the reply slip below as well as the attached medical form in order to consent to your child taking part in this trip. If your child is unable to attend, could you please hand back the reply slip only so that your child can be removed from the list. If you feel you may not be able to support your child's participation in this trip for financial reasons, please make an appointment to see the Head teacher or in her absence a member of the Senior Leadership Team to discuss this.

Many thanks

Mrs Rivers
Deputy Head Teacher

Mrs Bamford
Trip Leader



Hungerhill Academy Trust
Company Number: 7939747

Registered Office: Hungerhill Academy Trust, Hungerhill School, Hungerhill Lane, Edenthorpe, DONCASTER, DN3 2JY
Hungerhill Academy Trust is a charity and the company is registered in England and Wales

Please detach and return this reply slip to Mrs Bamford in room 14 ASAP

I do/ do not (please delete as necessary) give permission for my child to attend the Lightwater Valley trip on **Friday 6th July**. I understand that this place is charged at £10.

Signed: _____ Date: _____

Pupils name: _____ Form: _____

Payment method (please tick): Cheque Parent Portal

Please take all payments to the finance office as per the instructions. Deadline for payment is 18th June 2018.

Offsite Emergency Contact Form

Pupil Surname: _____

Pupil First name (s): _____

Pupil DOB: _____

Please provide an emergency contact number that will be available on the day that your child is on the arranged school trip. This can be a mobile numbers if you wish.

Emergency Contacts

Contact Name(s): _____

Relationship to Pupil: _____

Contact Number(s): _____



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Medical Information

Please provide information of any medical conditions you feel we need to know for the duration of the trip. This could include asthma, allergies or any other medical condition that your child takes regular medication for:

Will your child have access to any medication on the day of the trip (i.e. an inhaler in their bag)?

Yes Please specify what medication they will be carrying _____

No

If you require a member of staff to be in charge of your child's medication and would like us to supervise the taking of this medicine, please detail below what the medicine is, what it is for and at what times you would like us to meet your child throughout the day.

Medication name and info:

Times required to meet staff:

Please sign below to give consent for trip staff to administer your child's medication.

Signed: _____ Date: _____



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