PRINCE HENRY'S HIGH SCHOOL
An "Outstanding" Academy for Students aged 13-18
Headteacher: Dr A A L Evans BSc(Hons), PhD

PARVA MAGNA CRESCUNT

Dear Parent/Carer

Ski Trip 2025, Italy, Saturday, 15th February –Saturday, 22nd February 2025

We are delighted to inform you that in February half-term 2025, we will be running a school ski trip to Pila in the Aosta Valley, Italy. This is open to students who are currently in Year 9 and Year 10, so at the time of travel they will be in Year 10 and Year 11. The trip will involve 5 days of skiing with fully qualified instructors and will give the opportunity to skiers of any level to learn and develop skills in this exciting sport. It is a great opportunity for students to go on their first ski trip and enjoy the challenge of learning to ski, or for more experienced skiers, to come and ski at a new resort and be challenged to develop their ability.

Our ski package is booked with Interski, a very experienced travel company with whom we have skied with before. We will be travelling by coach to Italy on **Saturday, 15th February 2025** and returning to the school on **Saturday,**
22nd February 2025.

The cost of this trip is **£1,470.00** and includes the following:

- 5 days of ski instruction
- 5 days lift pass
- Rental skis, boots, poles and helmet
- Return coach travel from PHHS to Italy
- Full board accommodation at Hotel Panoramique, Sarre, Aosta.
- Winter sports insurance
- Evening entertainment

Although this includes the vast majority of the trip's cost, it is important that parents are aware that their child will need appropriate clothing for skiing. This can of course be purchased externally, however, Interski also offer a full clothing hire service. Students will be travelling with their own passports and EHIC/GHIC card.

You can apply for a place by completing the registration form and returning it by **Wednesday, 4th October 2023**. If the trip is over-subscribed, names will be randomly selected and a waiting list established. Students who are allocated a place will need to pay a deposit of **£250 through Parentpay by Friday, 13th October 2023**. Payment of the balance is by instalments: the first payment of **£400 by Monday, 18th March 2024**, second payment of **£400 by Monday, 1st July 2024** with the final payment of **£420 by Monday, 4 November 2024**. If students withdraw from the trip after deposits have been paid, a full refund will only be possible if their place is taken by another student.

Teachers accompanying residential visits carry an enormous responsibility for the students in their care. We therefore reserve the right to refuse a place to any student whose behaviour in school does not meet our expectations. As skiing is a hazardous activity, we will only accept students onto this trip who we are sure can be trusted to show the highest standards of behaviour.

If you have any further enquiries, please do not hesitate to contact me.

Yours sincerely

Dr J Orme
Ski Trip Organiser

Ski Trip 2025

It is very important that you fill in all sections of the form below.

This reply slip must be returned to Dr Orme via Student Reception by Wednesday 4th October 2023

Pupil's Full Name (as on passport)…….

Name if different to above ……Form…….

Date of Birth ……..Nationality ……

I have my own Passport which has at least 6 months before expiry upon date of travel ☐

Has your child skied before (please tick) Yes ☐

No ☐

Ability Level (please circle) Beginner Intermediate Advanced

If the answer was Yes please give brief details (eg Ben has skied for 2 weeks with family over last two years)

……

……

Please be aware that skiing is a physically demanding activity. Students on the trip will be expected to ski for the duration of the trip unless they are injured.

I have read through the form carefully and want my child to take part in the Prince Henry's High School Ski Trip 2025. I understand that once places are allocated, the deposit paid will be non-refundable unless my child's place can be filled by another student.

I understand that the cost of the trip may be subject to exchange rate fluctuations and that there may be additional costs due to forces beyond the school's control.

Signed …… (Parent/Guardian)

Date ……

Prince Henry's High School Medical Information Sheet

Pupils Name:_____ Form:_____

Trip: _Ski Trip, Pila, Aosta, Italy_____

Home Address:	
Phone Number:	
Emergency Contact Number (if different from above):	
Doctors Name:	
Doctors Address:	
Doctors Phone Number:	
Details of any medical condition which may affect pupil during the visit:	
Details of any medication to be taken during visit:	
Can your child swim?	
Do you consider your child is physically fit enough to take part in the proposed activity?	
Any further information you think the Party leader should be aware of (including dietary requirements):	

Signed (Parent/Carer): _____Date: _____

EDUCATIONAL VISITS – PARENT AND CARER CONSENT FORM

Student: …… Form: ……

I agree that my child may take part in the educational visit organised by the school to:

Pila, Aosta, Italy……

To take place on ……Saturday 15th February 2025 – Saturday 22nd February 2025……

Signed: …… Date: ……
(*Parent/Carer)*

1. Pupils are insured against personal accident through the School's Insurers. A detailed copy of the policy outlining benefits is available on request from the School Office.

2. The Governors accept no responsibility for accidents or injury to pupils, or for loss or damage of personal effects, unless the cause is the negligence of the school or any member of its staff.

3. Parents are advised, wherever possible, to give the school a telephone number at which they can be contacted in case of emergency, in particular when urgent medical treatment may be necessary. Parents who are willing to allow urgent medical or dental treatment to be given to their children when necessary should sign below.

Emergency Contact Number for duration of visit (preferably two)

1st) Name of Contact .....Telephone No: ……

2nd) Name of Contact .....Telephone No: ……

I AGREE that medical and dental treatment may be given to my child if necessary, including the administration of a general anaesthetic and to surgical operations in the case of emergency, in accordance with the recommendation of a qualified medical practitioner.

Signed: …… Date: ……
(*Parent/Carer)*

If you have any medical / dietary information which you think the Party Leader should be aware of please give details.

……

……