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

September 2023

Dear Parent/Carer

The Woman in Black, Malvern Theatre

We have managed to secure tickets to see a production of The Woman in Black at Malvern Theatre on Friday, 10 November 2023.

We will travel by coach leaving Prince Henry's at 6.00 pm and returning to school at approximately 11.00 pm. Students do not need to wear school uniform but they should dress smartly and appropriately for the theatre. The cost of the trip is £25.00.

If your child would like to attend then please make payment via Parentpay. If you have not activated your Parentpay account or if you need any assistance then please contact the school finance team by email to parentpay@princehenrys.worcs.sch.uk.

The deadline for making payments is **Monday, 9 October 2023,** and In the event of this trip being over-subscribed, places will be randomly allocated and a waiting list will operate for any student who is not successful in the initial allocation.

Please return the attached form to Student Reception.

If you have any queries please do not hesitate to contact the Drama department at school.

Yours sincerely

Mrs Maxine Cook
Head of Drama

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 see

The Woman in Black

To take place on: **Friday, 10 November 2023**

At: **Malvern Theatre**

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/Carers 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/Carers 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.

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Parentpay Reference (from your confirmation email)……..