

Dear Parent/Carer

Drama and English Trip to Milton Keynes Theatre to see An Inspector Calls on 28th September 2022

As part of the GCSE English course and to provide an opportunity to see a live theatre performance, we are offering students the opportunity to see An Inspector Calls at Milton Keynes Theatre. This is the set text for GCSE English. It is an invaluable opportunity to see the set text performed by a professional company. Students will be answering exam questions on the text.

The coach will leave Montsaye Academy at 6.00pm and we will be back by approximately 10.15pm. The cost of the trip is £23.00, which includes travel and entrance. **Places are limited and we will operate on a first come, first served basis.** Please arrange transport home for your child as we will be arriving back late to the school.

Please note that payment by either cash, cheque or online payment confirms the place of the trip. The attached form must be returned after online payment. I will confirm a place on the trip when it is full.

In accordance with the school's charging and remissions policy, we are asking parents to make a voluntary contribution to cover the costs of this activity. There is no obligation to make a voluntary contribution and no child will be excluded from the trip but it will be necessary to have sufficient voluntary contributions for the trip to go ahead.

Yours faithfully



Mr Shea
Teacher of Drama

Visit to An Inspector Calls on Wednesday 28th September

Student's name: _____ Form: _____

I hereby give permission for my son/daughter to attend this trip and enclose the required forms and payment.

I have paid by cheque/cash/online payment (*delete as appropriate*)

Signed: _____ Date : _____
(Person with legal parental responsibility)



MONTSAYE ACADEMY

Name:

Form:

Details of event: English and Drama Trip to Milton Keynes Theatre on Wednesday 28th September, to see An Inspector Calls, leaving Montsaye Academy at 6.00pm and returning at approximately 10.15pm.

I agree to _____ (name) taking part in this visit

and have read the letter. I agree to _____ 's participation in the event. I acknowledge the need for _____ to behave responsibly.

Medical information about your child

a. Any conditions requiring medical treatment, including medication? YES/NO

If YES, please specify

b. Is your son/daughter allergic to any medication? YES/NO

If YES, please specify:

I will inform the Group Leader 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 anesthetic or blood transfusion, as considered necessary by the medical authorities present.

Contact telephone numbers:

Work: _____ Home: _____ Mobile: _____

Home address: _____

Alternative emergency contact:

Name: _____ Telephone number: _____

Address: _____

Name of family doctor: _____ Telephone number _____

Address: _____

Signed: _____ Date _____

Full name (capitals): _____
