

Executive Headteacher: Mr T Burton, MA (Cantab)
Head of School: Ms G Greenhalgh

Millthorpe School
Nunthorpe Avenue
York YO23 1WF
01904 686400
admin@millthorpeschool.co.uk
www.millthorpeschool.co.uk

29 June 2018

Dear Parent/Carer,

VISIT TO YORK THEATRE ROYAL FOR A PERFORMANCE OF J.B. PRIESTLEY'S AN INSPECTOR CALLS, FRIDAY 14 SEPTEMBER, 7PM-9PM

The English Department would like to invite your child to attend a performance of J.B. Priestley's *An Inspector Calls* at the Theatre Royal, York, while it is on tour, after a sell-out West End season. The performance will cost a total of **£33** (a reduced rate for the seats we have booked). There are a limited number of tickets available, so names of pupils who have returned the relevant forms by the deadline will be entered into a hat, and parents will be informed by email if their child has gained a place.

As it is an evening performance, students will be required to make their own way to the venue (meeting point just outside the Theatre Royal, St. Leonard's Place) for **7:00pm**, and we would ask that they be collected for **9:00pm** by a parent or guardian when the performance ends. If you wish to arrange an alternative method for your child to return home, please provide a signed note expressing this wish in advance of the evening.

We hope that this trip will support students' understanding of the play, which comprises a significant part of their English Literature GCSE. This is also an opportunity for them to experience viewing an internationally renowned and culturally rich, multi award-winning play.

Please complete the reply slip below and the attached consent form and return them to Ms. Redman **by Thursday 5 July**.

Yours faithfully,

A Redman

E Arnold

Ms. A Redman

Mrs. E Arnold

English Teacher, Millthorpe

Head of English, Millthorpe

REPLY SLIP- VISIT TO YORK THEATRE ROYAL, ST. LEONARD'S PLACE - £33

To be returned to Ms Redman (B15 or English Office)

STUDENT NAME: FORM:

	I give permission for my child to participate in the visit to York Theatre Royal on Friday, 14 September 2018
	I enclose the Parental Consent Form
	I give permission for Millthorpe to take photos of my child for school communication purposes (e.g. Twitter, newsletter)

Signed: Parent/Carer Date:



Millthorpe School is a trading name of South Bank Multi Academy Trust
www.southbanktrust.co.uk
Company Number: 10067116
Registered Office: Millthorpe School, Nunthorpe Avenue, York YO23 1WF





MILLTHORPE SCHOOL – PARENTAL CONSENT FORM

Student Name: Tutor Group:

Address:.....

Name & Contact Tel. No. of Parent/Carer:

Alternative Emergency Contact Name & Tel. No:

I CONSENT TO MY CHILD PARTICIPATING IN THE FOLLOWING VISIT:

1. Details of Visit

Date of Visit:	Friday 14 th September
Visit to:	YORK THEATRE ROYAL – PERFORMANCE OF ‘AN INSPECTOR CALLS’

2. Medical Information

a) Does your child have any conditions requiring medical treatment or medication?.....**YES / NO**

If **YES**, please specify condition, any treatment, medication and dosage:

.....

b) Is your child allergic to any medication, foodstuffs, wasp stings, etc? **YES / NO**

If **YES**, please specify:

c) Please give details of any other medical information that we should know about:

.....

d) Name of family doctor: Tel. No:

e) Special dietary requirements (residential visits only):

3. Declaration

- *I have read the information sheet giving details of the above visit and wish my child to be allowed to join the party for the visit and to take part in all activities.*
- *I consent to my child being given any necessary emergency medical treatment during the course of the visit.*
- *I consent to my child being returned to the care of a member of staff of Millthorpe School following any medical treatment.*
- *I consent to staff administering prescription medication required by my child (details above).*
- *I consent to staff administering pain relief medication to my child where appropriate (e.g. Paracetamol).*
- *I will advise the Trip Organiser of any change in medical or other circumstances between now and the commencement of the visit.*
- *I acknowledge the need for my child to behave responsibly.*

Signature of Parent/Carer: Date:

**THIS FORM, OR A COPY, MUST BE TAKEN BY THE GROUP LEADER ON THE VISIT.
A COPY SHOULD BE RETAINED BY THE SCHOOL CONTACT.**