



## Re: Chester Zoo Trip - Year 7

Dear Parents and Carers,

We are immensely proud of our students for embracing the school's high standards in every aspect of school life. To celebrate this significant shift in school culture over the last 12 months, we are delighted to announce that we have arranged a complimentary educational trip to Chester Zoo for all students.

As we celebrate this progress, please know that our commitment to school improvement remains unwavering. We will persist in encouraging every student to grow, excel, and succeed. Your continued support is invaluable, and we are grateful for the partnership in supporting us to foster an environment of academic excellence.

> Trip to: Chester Zoo - Year 7

Date: Thursday 7th December 2023

Time: All day (8:35am - 3:30pm)

Organiser: Mr Mee

Cost: Free

Travel: Will be provided from school, to and from Chester Zoo

**Dress Code:** Non-school uniform (own clothes- outdoor wear including

coat, hat, gloves and scarf)

Behaviour: Behaviour during the day must polite, respectful and

demonstrate our school values

Personal Please note that if a mobile phone, IPod, or any other items Possessions:

of value are lost, it is at your child's own risk, the school

takes **no** responsibility for these items.

Please ensure that your child arrives to school on time as the coaches will be leaving promptly. Those who are eligible for free school meals will be able to collect a grab bag on the morning of the trip. Once again, thank you for your support, together, as a school community we will continue to build on our successes.

Best wishes,

Peter Mee **Head of School** 



Head of School: Peter Mee offices@birkenheadparkschool.com Park Road South, Birkenhead, Wirral, CH43 4UY





Please complete and return the consent form to **Miss Chong** if you wish your child to be included in this trip.

| Trip to: Chester Zoo  |       | Date: Thursday 7 <sup>th</sup> December 2023 | Date: Thursday 7 <sup>th</sup> December 2023 |  |
|---|-------|--|--|--|
| Student's   | name: | Form:  |  |  |
| <ul> <li>I agree to my child taking part in the above mentioned visit and agree to his/her participation to any or all of the activities described. I acknowledge the need for obedience and responsible behaviour on his/her part.</li> <li>I understand that the staff member in charge of the party will be acting in loco-parentis and in the event of an accident, I agree to my son/daughter/ward receiving emergency medical treatment, which might include the use of anaesthetic and blood transfusions, as considered necessary by the medical authorities present.</li> <li>I undertake to inform the organiser as soon as possible of any change in the medical circumstances of my son/daughter: between the date on which I completed this form and the commencement of the journey.</li> <li>I understand that The Birkenhead Park School is insured in respect of its legal liabilities only and that there is no Personal Accident, or other cover, unless we have been advised specifically by the organiser.</li> <li>Accidents may therefore arise for which The Birkenhead Park School is not responsible. Parents may wish to obtain suitable insurance to cover such eventualities.</li> </ul> |       |  |  |  |
| Signed:   |       | Date:  |  |  |

## **Emergency Contact Details:**

| Parent/Carer name | Relationship to student | Contact No |
|-------------------|-------------------------|------------|
|                   |                         |            |
|                   |                         |            |

## Please also answer the following questions

| Do you have any ongoing medical conditions such as asthma or allergies that require medication?   | Yes / No |
|---|----------|
| Details:  |          |
| Allergies (food, medication, insects, plants, animals, etc.):   | Yes / No |
| Details:  |          |
| Any special dietary needs?  | Yes / No |
| Details:  |          |
| Are there any disabilities or special needs we need to know about?  | Yes / No |
| Details:  |          |
| To the best of your knowledge, has your son/daughter been in contact with any contagious or infectious diseases, or suffered any recent condition that may become infected or contagious? | Yes / No |



Details:





