

March 2024

History Battlefields Trip September 2024

Dear Parent/Carer

Re: Year 10 (-11) History Trip to Belgium/France, Thursday 26th – Saturday 28th September 2024

I am writing to you regarding the Year 11 History trip to Belgium and France, Thursday 26th – Saturday 28th September 2024.

I would like to take this opportunity to remind you that the second payment of £70 was due to be paid by parent pay by **Friday 2nd February.** If you have not already done so, please could you make this payment as soon as possible. The final payment of £260 will be due by **Wednesday 10**th **July 2024**, although payments made before this date will be accepted.

Please could you provide me with a photocopy of the passport that your child will be travelling on by **Tuesday 16**th **April** (students should bring this directly to my office), alternatively you can email me a photograph of the passport at the email address below and I will print it out on your behalf.

Students travelling on a non-EU passport may require a visa to enter Belgium & France, please check this in advance www.schengenvisainfo.com/who-needs-schengen-visa, in this case, I will also need a copy of their proof of UK residency (e.g., their UK visa or residence permit, or a stamp from the Home Office or immigration official) in addition to a copy of their passport. Passports should be less than 10 years old on the day of entry (check the 'date of issue') and valid for at least 3 months after the day we leave (check the 'expiry date'). If your child is one of the few students who need to apply for a new passport/renew their passport, it is essential that this is done as soon as possible.

Students will also be required to bring either a current European Health Insurance Card (EHIC) or a new UK Global Health Insurance Card (GHIC), with them on the trip. These cards are free of ordered the official charge and can be quickly and easily on website https://services.nhsbsa.nhs.uk/cra/start. Please provide a photocopy of your son/daughter's EHIC/GHIC card at the same time as their passport if possible, however if you don't already have a card, please provide a copy of their passport and send the copy of the GHIC card once it arrives. If your child is under the age of 16, you will need to apply for a GHIC card for yourself and make an application for your child at the same time.

Could I also ask that you complete and return the attached medical questionnaire **by Tuesday 16**th **April** (again, this should be brought directly to my office or emailed directly to me). If your child has any dietary requirements, including eating Halal or vegetarian food, it is important that you make this clear on the form, as the school may not have this information on the system.

Headteacher Mrs Colette O'Dwyer

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I am also pleased to inform you that France has lifted all Covid- 19 travel restrictions and as such, the students will no longer need to provide proof of vaccination or take a PCR or antigen test in order to enter France. Whilst I will try to keep you updated of any changes, please monitor the situation carefully on the government website www.gov.uk/foreign-travel-advice and take the necessary steps to ensure that your child is able to travel.

The school is not liable if your child is refused entry into any country due to failure on your part to meet entry requirements (this will also not be covered by our insurance policy).

If you have any questions in the meantime, please feel free to contact me by email on lcramp5.310@parkhighstanmore.org.uk.

Yours faithfully

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Ms L Cramp

Assistant Headteacher

MEDICAL AND CONSENT FORM

History: Battlefields trip September 2024

Please return with a copy of the passport that your child will be travelling with (and a copy of their GHIC if it has arrived).

Name of student (as on passport):
Date of birth:
 Does the above person: Have a medical condition requiring medical treatment of medication? Y/N Have any allergies? Y/N
Please give details of any medical conditions/treatments and allergies below:
Has he/she been vaccinated against Covid-19? Y/N
Does he/she have any special dietary requirements (including Halal food)? Y/N If yes, please give details:
I wish to draw the following to the group leaders' attention (e.g. allergies, phobias, travel sickness, recent operations or treatment, sleeping problems, inability to swim):
MAIN EMERGENCY CONTACT
Name: Relationship:
Address:
Day phone number:

Evening phone number:
Other:
SECOND EMERGENCY CONTACT
Name: Relationship:
Address:
Day phone number:
Evening phone number:
Other:
FAMILY DOCTOR DETAILS
Name:
Address:
Phone number:
GUARDIAN DECLARATION
I have read and understand the details of the visit set out in the letter of March 2024.
I agree that (full name of child)
 I agree that (full name of child) can participate in the visit and activities described and I understand that these maybe subject to slight changes as a result of factors such as the weather;
 I agree that (full name of child) can participate in the visit and activities described and I understand that these maybe subject to slight changes as a result of factors such as the weather; is in good health and fit to participate in the activities described;
 I agree that (full name of child) can participate in the visit and activities described and I understand that these maybe subject to slight changes as a result of factors such as the weather;
 I agree that (full name of child) can participate in the visit and activities described and I understand that these maybe subject to slight changes as a result of factors such as the weather; is in good health and fit to participate in the activities described; can receive medical treatment as necessary (including paracetamol). will have a British passport which is valid (or will have applied for a visa if necessary).
 I agree that (full name of child) can participate in the visit and activities described and I understand that these maybe subject to slight changes as a result of factors such as the weather; is in good health and fit to participate in the activities described; can receive medical treatment as necessary (including paracetamol). will have a British passport which is valid (or will have applied for a visa if necessary). will have a Global Health Insurance Card
 I agree that (full name of child) can participate in the visit and activities described and I understand that these maybe subject to slight changes as a result of factors such as the weather; is in good health and fit to participate in the activities described; can receive medical treatment as necessary (including paracetamol). will have a British passport which is valid (or will have applied for a visa if necessary).
 I agree that (full name of child)
 I agree that (full name of child) can participate in the visit and activities described and I understand that these maybe subject to slight changes as a result of factors such as the weather; is in good health and fit to participate in the activities described; can receive medical treatment as necessary (including paracetamol). will have a British passport which is valid (or will have applied for a visa if necessary). will have a Global Health Insurance Card I undertake to inform the group leader as soon as possible of any change in medical circumstances, or if he/she becomes in contact with and infectious or contagious disease in the four weeks prior to travel. I acknowledge the need for the person named above to behave responsibly and agree
 I agree that (full name of child)
 I agree that (full name of child)

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Although all staff escorting the party will exercise due care and attention, they cannot
be held responsible for any loss, damage or injury which may befall my child, named
above, during the trip. In order that any potential risks are minimised, I will ensure
that my child reads the information booklet carefully before the trip.
Signed:
Name in capitals:
Date:
Relationship to student: