



Mrs Lauren Rodger MA Hons
HEAD TEACHER

NORTH BERWICK HIGH SCHOOL
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October 2017.

Dear Parent/Guardian,

The drama department is organising a trip for the National 4, National 5 and Higher drama pupils to the King's Theatre in Edinburgh to see a production of 'The Steamie.' This event will take place on Monday 6th November 2017. Pupils will be leaving North Berwick High School at 6pm by hired coach and will return at approximately 11pm to the school.

The aim of this trip is to prepare Higher drama pupils for their written exam, specifically the performance analysis essay. Therefore attending this trip is **highly recommended** by the department so that each pupil in the class can study the same production for their final exam. Additionally, this will be an excellent opportunity for the National 4 and National 5 pupils to experience a professional production to broaden their experience and knowledge of theatre.

The cost of this trip is £21.00 per person. This covers the performance ticket and the required transport. I would ask you to return the slip below, together with payment of £21.00 by Wednesday 11th October 2017, along with the attached consent form to Mrs Tant in the drama department. Our preferred method of payment is online via East Lothian Council's secure internet payment service. This can be accessed by clicking on the 'Online Payments' link found on the left hand side of the NBHS homepage (www.edubuzz.org/northberwickhigh) or by visiting www.eastlothian.gov.uk and clicking on PAY FOR IT. Select *High School Payments* from the list and fill in the form with the details. Please use the school payment reference **DRAMA- 'THE STEAMIE'**. Alternatively cash or cheques (payable to East Lothian Council) are accepted. If you would like to seek financial assistance, please contact Mr Jones at the school.

Yours sincerely,

Dawn Tant,
Drama Dept.

I wish my child to attend the Kings Theatre trip to see 'The Steamie' on Monday 6th November 2017 and enclose cheque/cash for £21.00 /or made online payment.

Pupils Name Reg Class

Parents signature Date

**EAST LoTHIAN COUNCIL
DEPARTMENT OF EDUCATION AND COMMUNITY SERVICES**

PARENTAL CONSENT FORM

Excursion: Drama Nat 4, 5 and Higher Visit to Kings Theatre, Edinburgh on Monday 6th November 2017 to see 'The Steamie' .Reg Class

Name of participant Age

Home Address

Telephone number(s) Home Work

Alternative for use in emergency

In the event of an emergency, it is important that the person in charge of the group has the necessary information about any medical condition which could affect the participation or treatment of your child/ward. All information requested will be treated in strict confidence, and will not necessarily prejudice the inclusion of your child in the activity. It is in the interests of your child that full and accurate information be given and that you notify us of any change in circumstances which might affect participation.

Has your child/ward had recent surgery or been in contact with any infectious or contagious disease?

Has your child/ward any known allergy (eg to penicillin)?

If your child/ward is currently undergoing treatment by a Doctor please give details including medication?

Has your child/ward received a tetanus injection within the last 10 years?

Has your child/ward any medical condition which a doctor should know about before carrying out treatment (eg Asthma)

Is there any activity in which your child may not participate?

Is there any additional information we should have? (Travel sickness, bedwetting, diet, diabetes, etc?)

Name of Family Doctor Tel No

Address

For water-based activities only

I certify that my child/ward cannot swim / can swim 50 metres / is confident in cold water wearing a buoyancy aid. (Ring as appropriate)

Signature Date

Insurance Information

East Lothian Council Public Liability Insurance will meet claims resulting from accidental injury or damage to property if it is proved it was caused as a result of negligence on the part of the Council or a Council employee.

Participants wishing to obtain cover for personal accident and Third Party Liability are advised to contact an insurance company or broker.

Declaration

I have read the information issued concerning the activity and the statement of insurance. I understand the nature of the activity/activities to be undertaken and consider my child/ward fit to take part. He/She does not suffer from any medical condition not stated above. I hereby consent to the submission of the above named to emergency medical or surgical treatment including the administration of anaesthetic or blood transfusion as considered necessary by the medical authorities present.

Name (Block Capitals) Parent/Guardian

Signature Date