



Mrs Lauren Rodger MA Hons  
HEAD TEACHER

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20th January 2016

Dear Parent/Carer

Our S2 pupils are currently learning about Islam in their Religious and Moral Education lessons. We are therefore organising a trip to the Edinburgh Central Mosque. This is an excellent opportunity for them to meet individuals of that faith, to learn from them and to experience their place of worship.

We are planning to go on Monday 8th February 2016. As there is space for only twenty young people to attend, names will be picked from a hat should the number of pupils interested in participating exceed this.

The total cost of the trip will be £12, which includes transport by train and lunch at the mosque kitchen after our visit. The Mosque kitchen's menu can be found online at [www.mosquekitchen.com](http://www.mosquekitchen.com).

If you wish your child to attend, please complete the enclosed parental consent form and return it with payment. All cheques should be made payable to East Lothian Council. Alternatively, you can pay cash.

If you have any questions about the trip, please do not hesitate to contact me at the school.

Yours faithfully,

Elliot Smith

Teacher of RME

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

**PARENTAL CONSENT FORM**

<b>Excursion:</b>	Edinburgh Central Mosque Visit	<b>Reg Class</b> .....
<b>Name of participant</b> .....	<b>Age</b> .....	
<b>Home Address</b> .....		
<b>Telephone number(s) Home</b> .....		<b>Work</b> .....
<b>Alternative for use in emergency</b> .....		
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?) .....		
<b>Name of Family Doctor</b> .....		<b>Tel No</b> .....
<b>Address</b> .....		
<b>For water-based activities only</b>		
I certify that my child/ward cannot swim / can swim 50 metres / is confident in cold water wearing a buoyancy aid. (Ring as appropriate)		
<b>Signature</b> .....		<b>Date</b> .....
<b>Insurance Information</b>		
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.		
<b>Declaration</b>		
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.		
<b>Name (Block Capitals)</b> .....		<b>Parent/Guardian</b>
<b>Signature</b> .....		<b>Date</b> .....