



Dear Parents/Carers,

24 September 2021

## **Year 7 – Marwell Zoo Trip – Activities Day: Thursday 14<sup>th</sup> October 2021**

On Activities Day, **Thursday 14<sup>th</sup> October**, the trip for Year 7 will be to **Marwell Zoo**.

Coaches will depart the school at **9:00am**. Students will be divided into groups, each accompanied by a member of staff, throughout their visit to the park.

Students do not have to wear school uniform but they should have a waterproof coat and sensible footwear for walking around the zoo. A hat and sun cream may also be necessary, depending on the weather forecast. They will also need to bring a drink and a packed lunch – no fizzy drinks or sweets please.

The coaches will return to the school for **4:30pm**.

The voluntary contribution for the trip will be **£23**. Should the numbers fall below the required figure or if there is insufficient interest, the trip may not be able to take place. Pupils in receipt of free school meals are eligible for funding on this trip. If your child is in receipt of pupil premium, the school may be able to support with the funding of the trip should you require financial assistance. Please contact Mr Malyon on [MalyonD1@piggottschool.org](mailto:MalyonD1@piggottschool.org) with any requests for funding.

If your child would like to take part in the trip to Marwell Zoo, please make payment and provide consent by **Thursday 30<sup>th</sup> September**. **Consent for day trips can be provided as part of the online payment process.** Payments should be made online through the SCOpay app, or by going to The Piggott School website and clicking on the 'Parents' tab. You then need to choose the 'online payments/purchasing' option for School Trips (SCOpay). Please note that if you are **not** using the online payment system, you will need to complete an 'offline' consent form (attached).

We would strongly encourage all students to take a lateral flow test prior to departure. If your child is required to self-isolate due to a positive test, or awaiting the results of a PCR, a refund will be available under our insurance policy. Any students displaying symptoms on the day should stay at home and book a PCR test.

If you have any questions, or if the short payment deadline presents difficulties, please do not hesitate to contact me.

Yours sincerely,

Mrs Romany Greatrex

Trips, Partnerships & Community Administrator

[trips@piggottschool.org](mailto:trips@piggottschool.org)



## Consent Form: Year 7 Marwell Zoo Trip, Thursday 14<sup>th</sup> October 2021

**NB: You do not need to complete this form if you are paying online as consent is already obtained as part of the online payment process.**

Student's Name \_\_\_\_\_ Tutor Group \_\_\_\_\_

I confirm that I have received the letter about the Year 7 Marwell Zoo trip on 14<sup>th</sup> October and I give permission for my child to take part.

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I have made a payment of **£23**, online, via the SCOpay app or website. **NB: those paying online do not need to complete this form, as consent is required as part of the SCOpay payment process.**

**OR**, I enclose a cheque (made payable to The Piggott School) for **£23**. I have written my child's name, tutor group and 'Marwell Zoo' on the back of the cheque

**OR**, I wish to make a request for the school to fund my child's place on this trip. I have emailed [MalyonD1@piggottschool.org](mailto:MalyonD1@piggottschool.org) explaining the circumstances (FSM, PP, financial difficulties, etc)

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I confirm that the medical/dietary information held at school is correct **and** that my child has no medical conditions that might affect their performance or safety on this trip,

**OR**, I have given details of any new medical/dietary information that the school is unaware of and any medical conditions that might affect my child's performance or safety on this trip, by emailing [medical@piggottschool.org](mailto:medical@piggottschool.org). **In your email please clearly state the name of your child, their tutor group and the name of the trip**

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**If there are any changes to my child's fitness / medical / dietary conditions between now and the time of the trip, I will inform the school by emailing [medical@piggottschool.org](mailto:medical@piggottschool.org).**

I agree to staff giving permission for any emergency treatment that the medical authorities deem necessary.

**Please contact the school if your emergency contact details for the duration of the trip will be different to those already held by the school.**

Name of Parent /Carer \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_ (Parent/Carer)

THIS CONSENT FORM CAN BE RETURNED BY EMAIL TO [trips@piggottschool.org](mailto:trips@piggottschool.org) (scans and photographs accepted)  
ALTERNATIVELY, PAPER COPIES MAY BE PLACED IN THE TRIPS POSTBOX IN RECEPTION.