



28 February 2018

Dear Parent/Carer

Residential Trip to Switzerland to view the Large Hadron Collider – 18-20 February 2019

I am delighted to inform you that we are planning a viewing of the astounding Large Hadron Collider base at CERN in Geneva, Switzerland. CERN is one of the largest and most respected centres for scientific research in the world and I write to offer your child a place on this extraordinary residential trip, as part of the Science Department's Enrichment Programme. The tour of CERN and associated exhibitions is a supreme example of *How Science Works* and fundamental physics. The journey to discover what the universe is made of and how it all began is a question every young scientist should ask, and have the opportunity to explore; the CERN scientific research centre is, of course, the ultimate environment for this.

The tour facts:

Accommodation:	Geneva Youth Hostel
Dates:	Monday 18 February– Wednesday 20 February 2019
Duration:	3 days/2 nights
Board Basis:	Half board accommodation
Airport/Airline	Flights from London Gatwick to Geneva with Easyjet
Cost	£375
What is included in cost	Half-board accommodation Insurance Return flights London Gatwick to Geneva with Easyjet Visit to CERN Visit to the History of Science museum Visit to the Museum of Natural History Visit to the International Red Cross and Crescent museum
Deadline 1	15 March 2018 - £100
Deadline 2	10 May 2018 - £70
Final deadline	30 November 2018 – Final balance

Payment

Please pay for the deposit of £100 via the online payment system using the following link: <https://www.scopay.com/midhurst?redirect=true>. If you require support with the online process please contact our finance department at; louise.stone@mrc-academy.org or Katherine.Chard@mrc-academy.org. If you do not have access to the internet please make cheques payable to 'Midhurst Rother College'.

Principal: Stuart Edwards

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e enquiries@mrc-academy.org
www.mrc-academy.org

If you are unable to contribute by the suggested deadline, you are invited to contact me in confidence so that suitable arrangements can be made to cover the cost of your son/daughter's participation.

Should you have any questions, please feel free to contact me at Karla.Norcross@mrc-academy.org

A little about WST - The Educational Travel Company we are choosing to travel with:

With more than 325 years combined experience in the school travel industry, the team at WST really do understand what makes an exceptional educational visit. They work closely with me during the whole tour planning process to ensure every detail is covered and our learning objectives can be realised. WST also realise that pupils want to have fun on tour, so advise on the best "fun" activities to complement our tour plans.

Many of the team at WST are parents themselves and they fully understand, as a parent, the need to feel that your money is not only secure but also invested into an experience your child will treasure for many years. You will feel reassured in the fact that WST is fully ABTA and ATOL bonded and they are members of the School Travel Forum which regulates safety and service standards, and have also been awarded the Learning Outside the Classroom quality badge.

Please do go and visit WST's website for further information: www.wsttravel.com

Yours sincerely



Mrs K Norcross
KS3 Co-ordinator of Science/Head of Kipling House/L1-3 qualified cheerleading coach

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Consent slip

Trip title: CERN, Geneva, Switzerland
Date of trip: 18-20 February 2019

Trip Leader: Mrs Norcross

Name of Student: Tutor Group:

I have made a payment through the cashless system Please tick

I can also confirm that the above named student has the appropriate valid passport/visa /EHIC card Please tick

Name of parent/carer:Contact Tel:

Signed: Date:

Please return this slip to Mrs Fowler at Student Reception by **Thursday 15 March** along with the medical consent form. Thank you.



Trip to:	CERN in Geneva, Switzerland
From (date/time):	18 February 2019
Until (date/time):	20 February 2019
Cost	£375
Party leader/department	Mrs K Norcross, KS3 Co-ordinator of Science

CONTACT INFORMATION		DOCTOR'S DETAILS	
Student name		Name of doctor	
Date of birth		Doctor's address	
Student mobile no			
Full home address		Doctor's telephone number	
Emergency contact numbers during trip			

MEDICAL INFORMATION/CONSENT– please answer the questions and sign below:		
Has your son/daughter had any of the following:	Y/N	If the answer to any of these questions is yes please give details(or attach on a separate sheet)
Asthma or bronchitis?	Y/N	
Heart Condition?	Y/N	
Fits/fainting/blackouts?	Y/N	
Severe headaches?	Y/N	
Diabetes?	Y/N	
Allergies to any medications?	Y/N	
Any other allergies?	Y/N	
Recent contact with contagious diseases/infections?	Y/N	
Other illness or disability including any current medical treatment?	Y/N	
Specific medical advice to follow in emergencies?	Y/N	
Special dietary requirements?	Y/N	
Prone to travel sickness?	Y/N	
Has your child been vaccinated against tetanus in the last 10 years?	Y/N	
Is your child currently having any medical treatment/taking medication (please provide full details)	Y/N	
I consent to any emergency medical treatment necessary during the course of the visit		SIGNED: Parent/Guardian



INFORMATION FOR OVERSEAS TRIPS

Passport number:	
Passport expiry date:	
Passport issued at:	
European Health Insurance Card number (EHIC):	

PARENTAL AGREEMENT – please read and sign below

Transport

I consent to the student travelling by any form of public transport and/or in a motor vehicle driven by the party leader or any other responsible adult member of the party who is authorized by law and duly insured to drive.

Health

I certify that to the best of my knowledge and belief the student is in good health and (if applicable) has received all necessary inoculations. I am aware of no reason on medical grounds why the student should not be a member of the party for this trip.

Passport etc (for foreign visits only)

I certify that the student has a current passport and (if applicable) all necessary visa and satisfies the entry requirements of the country to be visited, and requirements for readmission to the United Kingdom.

Accident/Illness

I consent to the student receiving medication as instructed and any emergency dental, medical or surgical treatment, including inoculations, general or local anaesthetic, surgery or blood transfusion, as considered necessary by the medical authorities present.

Remotely supervised time (senior College only)

I consent to the student having remotely supervised time in the daytime in a group of students with the prior permission of the party leader

Personal effects of the student

I acknowledge that the student will be responsible for the safety of his/her own money and personal effects. I will not hold the College responsible for losses unless caused by the negligence of the College.

Swimming and other activities

I certify that the Student *is/is not a competent swimmer. (Please delete one **and initial**)

I agree to the student taking part in any/all of the activities (where applicable) contemplated as listed in the visit programme, except for the following:

(N.B. all additions, deletions or amendments to entries in this box must be initialled by the parent)

Insurance

I understand the extent and limitations of the insurance cover provided, and know of no information that may affect the insurance.

Signature of Parents/Carers

I, the undersigned who have parental responsibility for the above named student have completed the information requested above and overleaf. I have read and understood and I consent to the matters set out above and overleaf.

I agree to inform the College as soon as possible of any changes in the medical or other circumstances between now and the commencement of any journey.

SIGNED:

(Parent/Carer)

Student agreement

I the above named student agree to observe the code of conduct for visits. I will do my best to ensure the safety of myself and other members of any party. I will at all times act with courtesy and consideration for others and do my best to uphold the good name of the College.

SIGNED:

(Student)