

**From: The Head of Art  
Mr A J Blain, BEd**

11<sup>th</sup> January 2010

Dear

#### LONDON ART VISIT

A visit to The Tate Modern and Tate Britain has been organised for A level artists. The visit will take place on 4<sup>th</sup> February 2010. We will be travelling by train from Lime Street Station. All students should arrive at the station for 9.00am and will return at approximately 10.20pm. Students will need to be collected from Lime Street. The cost of the visit is £20.00.

All students will, of course, be covered by the School's personal accident and travel insurance policy (*details of which are available on request*). We do advise that pupils take sandwiches and some money to buy food throughout the day. Students will also need a sketch pad, camera and money for postcards etc.

Please will you complete the payment and consent form and return it to me. Please do not hesitate to contact me at School if you have any further questions about this visit.

Yours sincerely

*A J Blain*

## BOOKING FORM: LONDON – TATE MODERN AND TATE BRITAIN

To book a place please complete the form below and return it to Mr A J Blain

### Payment arrangements

Our preferred method of payment is direct debit and payment will be collected as follows:

- **One Direct debit payment of £20.00 will be collected by the next direct debit.**

If you do not already have a direct debit arrangement in place for the payment of fees, either monthly or termly, please call Mrs Burgess on 0151 651 3013 to set up a direct debit for the payment of extras, such as this trip.

For parents who do not wish to set up a direct debit arrangement, we require payment for the full amount by debit card or cheque as soon as possible.

Please note that we are unable to accept payments in cash or by credit card.

### Withdrawal

In the event of withdrawal of a pupil, a refund will be made, based upon the full cost of the trip less the deposit and a share of costs already incurred and other unavoidable costs.

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## LONDON – TATE MODER AND TATE BRITAIN – 4<sup>TH</sup> FEBRUARY 2010

**I would like my child to take part in the above visit.**

PUPIL NAME:

FORM :

- |                                                                             |    |                          |
|-----------------------------------------------------------------------------|----|--------------------------|
| • Please collect the balance of the cost by direct debit (preferred option) | or | <input type="checkbox"/> |
| • I wish to set up a direct debit                                           | or | <input type="checkbox"/> |
| • Payment by debit card. Please phone Mrs Burgess on 0151 651 3013          | or | <input type="checkbox"/> |
| • I enclose a cheque for £20.00 made payable to Birkenhead School           |    | <input type="checkbox"/> |

PARENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

CONSENT FORM

1. I agree to my son/daughter taking part in this School visit. I am aware of the details of the activities which have been proposed and give my consent for him/her to take part in these activities.
2. I agree to authorise the Party Leader during the course of the visit to approve such medical treatment for my son/daughter as is deemed necessary in an emergency; this must be on the advice of a qualified medical practitioner.
3. I acknowledge that neither the organiser of the visit nor the Governors of the School can accept responsibility for personal injury sustained, nor loss occurred, due to circumstances beyond their control.
4. I am aware of and satisfied with the School's insurance cover for this visit.
5. I have added to the bottom of this form details of any contagious diseases or infections which my son/daughter has suffered from in the past 3 months.
6. I have added to the bottom of this form any instructions or information needed for this specific trip (e.g. short term medication, parents away on holiday etc.)

I confirm that there have been no changes to the long term information provided to the School on the 'Update Form for Educational Visits' (which gives details of emergency contacts, medical details, dietary  requirements and the administration of medication information)\*

**OR**

I confirm that there have been changes and attach, as requested, an amended 'Update Form for Educational Visits'\*.

PUPIL:

FORM:

Visit to: LONDON – TATE MODERN & TATE BRITIAN

Date: 4<sup>TH</sup> February 2010

Signed: \_\_\_\_\_ (Father/Mother/Guardian\*)

Date: \_\_\_\_\_

(\*delete as appropriate)

**Additional Information for points 5 & 6 above:-**

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