



SEAHAM HIGH SCHOOL

Engaging minds, broadening horizons

Seaham High School
Station Road
Seaham
Co. Durham
SR7 0BH

01915161600

Head Teacher: Mr D.A Shield

Deputy Head: Mr G.W Lumsdon

Deputy Head: Mr J.E Henderson

Dear Parent/Carer,

As part of our extensive range of activities which take place during our annual Activities Week, the Technology and Science Faculties have organised a trip to Disneyland Paris.

The cost of the trip will be £370 and will take place from Tuesday 10th July – Friday 13th July 2018. The trip offers excellent value for money and I have listed below what the cost includes.

If you would like your child to go on this trip please complete the EV4 form attached to this letter and place a £50.00 non-refundable deposit in the student payment envelope and give to Mr. Spence in CM1 at brunch on **Friday 6th October** onwards to secure your child a place on the trip.

Places are limited; therefore these will be allocated on a first come, first served basis. We expect this to be a popular trip after being oversubscribed for last three years trips. Therefore early payment to secure a place is advised.

The remainder of the money would need to be paid by 20th May 2018. Paying in installments is welcome and a payment schedule will follow in the future.

Many thanks,

Mr. David Spence

Mr. Christopher Boyce

Provisional Itinerary: *Please note this itinerary is subject to change and will be finalised closer to the trip.*

Tuesday (10 th July)	Wednesday (11 th July)	Thursday (12 th July)	Friday (13 th July)
Depart school – 6am	Continental breakfast (Included)	Continental breakfast (Included)	Arrive back at school – 1pm approx. (Please note: Students will be allowed to return home on the Friday instead of remaining in school as they will have travelled overnight – you will need to make arrangements to collect students from school.
Travel by coach to Dover ferry terminal	Entrance to Disneyland – Walt Disney Studios	Entrance to Disneyland Park	
Arrive at Disney Hotel Cheyenne – 7pm	Lunch voucher for use at many park restaurants (Included)	Lunch voucher for use at many park restaurants. (Included)	
Disney Village – Evening meal (Students will require money for this)	Evening meal – (Students will require money for this)	Evening Meal – McDonalds (Students will require some money for this)	
		Depart Disney to travel home – 10pm	



EMAIL : OFFICE@SEAHAMHIGHSCHOOL.COM

WWW.SEAHAMHIGHSCHOOL.COM



PARENTAL CONSENT / MEDICAL FORM**EV4 (2011 - School)**

School	Seaham High School – Disneyland Paris July 2018		
Name of Pupil / Young Person		Date of birth	

1. General consent

I agree to my son/daughter participating in educational visits and other off-site activities including –

- All school organised off-site activities before, during and after the school day.
- All visits (including residential visits) which take place during the holidays or a weekend
- Adventure activities at any time
- Off-site sporting fixtures outside the school day
- All off-site activities for nursery schools

In exceptional circumstances a further consent may be requested but the school will send parents information about each trip or off-site activity before it takes place.

You can, if you wish, tell the school that you do not want your child to take part in any particular visit or activity.

This consent will apply for the duration of my son/daughters enrolment at the above school or until withdrawn in writing.

2. Medical information about your child

I agree to my son/daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.

I will inform the school/group leader of any changes in medication that is relevant to educational visits and off-site activities.

Please list any medical conditions or prescribed medication you want the school and group leader to be aware of. Include details of all medication your child will need to take on visits / off-site activities.

List all medical needs -

I hereby undertake to indemnify the school, Durham County Council and the staff accompanying the group against any costs and expenses reasonably incurred by them on behalf of my child during the visit (for example, the cost of replacement food or clothing not supplied for a trip/visit). This indemnity will not extend to any claims, damages, costs or expenses against the risk of which Durham County Council or member of staff are entitled to be indemnified under any policy of insurance.

3. Signature of parent / guardian.

Please sign this form if you agree with all the above.

Name (capitals)		Relationship to young person	
Signature		Date	
Emergency contact number –			