



Mary Webb School & Science College, Pontesbury, Shrewsbury, Shropshire SY5 0TG

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10th September 2019

Dear Parent/Carer

GCSE Geography Field Study Visit to Birmingham on Friday 27th September 2019

To support the work being done in Geography, a field study visit has been arranged for Year 11 students to collect primary data, which is needed as part of the GCSE Geography Course, in Birmingham City Centre on Friday 27th September 2019.

Travel will be by coach, leaving school at 9 am and returning at 4.30 pm. They should wear non- school uniform; they should wear a suitable coat for being outdoors in September. Students should bring a packed lunch and drinks. A small rucksack would be useful.

You are invited to make a voluntary contribution of £6.00 towards the cost of the visit. We must however, inform you that as the school could not bear the whole cost of the visit, the visit will not take place unless all parents/carers, who are able, are willing to contribute. If you find it difficult to meet this cost, you are invited to contact the School Business Manager in confidence to discuss payment. Students who receive free school meals will be supported by funds allocated to the school.

Please indicate on the slip below if you wish your son/daughter to take part in this field study and return it, together with your payment, by Thursday 19th September 2019 .

Yours sincerely

Mr P Lee
Head of Humanities

Mr G Davies
Assistant Headteacher

Mr P Salmon
School Business Manager

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Geography Field Study Visit to Birmingham Friday 27th September 2019

Name of Student: Form:

- I give permission for my son/daughter to take part in the above visit.
- I enclose a voluntary contribution of £6.00 cash/cheque. (*Cheques should be made payable to 'Mary Webb School' – please write the student's name and form on the reverse of the cheque*).
- I do not wish to contribute.
- I agree to authorise any member of staff during the course of this activity to approve such medical treatment for my son/daughter as is deemed necessary in an emergency or upon the advice of a qualified medical practitioner, in the event that I cannot be contacted.

For office use only			
Receipts	£	Date	Signed
Cheque			
Cash			

Name of Parent/Carer: Signed:

Date:

Please return to the school office by Thursday, 24th September 2019 PL/PR