



21 May 2018

Dear Parents/Guardians

**Theatre Royal Plymouth - Macbeth  
Thursday 18<sup>th</sup> October 2018**

To widen the educational experience of our pupils, the English department are running an optional trip to the Theatre Royal, Plymouth for students in current Years 8 - 10.

The National Theatre, creators of *War Horse* and *The Curious Incident of the Dog in the Night-Time*, bring this epic and visually daring production of Shakespeare's most intense tragedy on a tour of the UK and Ireland immediately following a sold out run in London. This is a fantastic opportunity to see the play that is part of the GCSE English Literature exam.

Details are as follows:

- Open to students in current Years 8 – 10.
- Matinee performance of Macbeth
- Running time 2hrs 30mins with interval
- Leave Isca at 12.30pm
- Return to Isca at 6:30pm approx.
- Correct School uniform must be worn

The cost of the trip will be £20, this includes transport. Places are limited to 40 and are available on a 'first come, first served' basis to students.

To secure a place, please complete the attached parental consent form and return with £20 no later than Friday 29<sup>th</sup> June 2018 to the college reception. Cheques should be made payable to **Isca**.

Any questions, please contact us at the usual school address.

Yc  y,

Emily Humphries – Teacher of English

Dear Parent/Guardian

Please complete and return the form below which relates to the forthcoming journey or activity for which you have already received details. The form gives your consent for your child to take part in this activity.

**Visit or Activity – Theatre Royal Plymouth – Macbeth**

**Dates and Times – Thursday 18<sup>th</sup> October 2018**

| Name of Child or Student | Date of Birth |
|--------------------------|---------------|
|--------------------------|---------------|

**SPECIAL DETAILS**

Any relevant information concerning your child's health requiring special attention but which does not prevent him or her taking part should be noted below. For example does your child:

- have any allergies?
- take medication and if so what is the dosage required:
- experience travel sickness?
- have diabetes, asthma or epilepsy?

**Has your child had any relevant recent illness?**

**Does your child have any special dietary requirements?**

**Does your child have Free School Meals and require a packed lunch?**

**YES / NO**

**Do you have any additional comments?**

**Consent/Agreement**

1. I would like my child to take part in trip listed above and agree to him/her taking part in the activities.
2. I consent to any emergency medical treatment required by my child during the course of the visit.
3. I confirm that my child is in good health and I consider him/her fit to participate.
4. I confirm I have/will make the £20 payment for this visit/activity.

**Please state if you will collect your child or give them permission to walk home:** .....

**Signature of parent/guardian**..... **Date** .....

**Name of parent/guardian** .....

**Address** .....

**Emergency contact details - Minimum of 2 contacts are required**

|   |   |
|---|---|
| <b>Home Telephone Number –</b>              | <b>Work Telephone Number –</b><br><br><i>Workplace Name -</i>                                       |
| <b>Mobile Numbers -</b><br><br>1.<br><br>2. | <b>Additional contact Name</b><br><br><i>Telephone Number</i><br><br><i>Relationship to student</i> |

**Name/address of family doctor** .....

.....**Date of last tetanus injection**.....