17 April 2018

Dear Parents and Carers

Annual Trip Disclaimers 2017-18

We are streamlining our system for some trip disclaimers, whereby rather than asking you to confirm your understanding of these disclaimers for each trip your son/daughter goes on, we only ask once a year. I trust that you will see the benefit of this in terms of reduced response time for you each time you receive a reply slip to complete.

Some disclaimers will remain on every trip reply slip, as a vital reminder to you to check certain things, such as ensuring provision of student-held medication for a trip and ensuring School holds the correct emergency contact numbers.

Please take a moment to read and complete the attached reply slip which covers this academic year. Completed slips should be returned to the School Office by Friday 27 April 2018.

We will contact parents and carers to update these disclaimers at the start of every future academic year your son/daughter is at Rickmansworth School.

Yours sincerely

Mr C Hambleton
Assistant Headteacher
To: School Office  
Re: Annual Trip Disclaimers, 2017-18

Student Name ........................................ (as it appears on their passport)

Form & Teaching Group ...................................

☐ I acknowledge the need for my son/daughter to behave responsibly and agree to the School’s procedures in this respect. Although the staff of the School escorting the party will exercise due care and attention, I understand they cannot necessarily be held responsible for any loss, damage or injury, which may befall my son/daughter named above during or as a consequence of School journeys and visits.

☐ I understand that upon return to School my son/daughter will no longer be under the authority of the School and my son/daughter is aware of the arrangements for getting home.

☐ I understand that the School reserves the right to remove from a trip any student whose behaviour at School does not meet the standards required of all our students. In such cases any deposits paid will be non-refundable and the full cost of the trip may be payable if a replacement cannot be found.

☐ I understand that I must notify the School Office of any change in the medical condition of my son/daughter, and of any change to the Emergency mobile numbers currently held by the School for me. Please check that the Primary and Secondary points of contact are correct, along with all other contact details.

☐ I understand that should my son/daughter carry their own medicine, they must bring it with them on this trip; otherwise they will not be permitted to go on the trip.

Parent Signature .......................................................... ..........................................................

My email address is .......................................................... ..........................................................