



Where Pupils Achieve and Excel
Headteacher: Mrs T Price BA (Hons) MA Ed

Our Ref: SEB/HD

11th January 2019

Dear Parents/Carers

We are starting the process of applying for a group passport for the school visit to Berlin 1st- 5th July 2019. All pupils, whether they have their own passport or not will be put onto the group passport as this makes the organisation much more straight forward. Your son/daughter will be issued a form with this letter which will need completing in full and returning to the school with two passport style photographs - which meet the standards of a passport application. This form and the photographs (with name and date of birth on the back) should be returned to the school office no later than Monday 11th February 2019.

At this stage we would like to ask that pupils apply for their EHIC card if they do not already have one. If you have not yet applied for your free EHIC card please visit <https://www.gov.uk/european-health-insurance-card> where one can be obtained. Ensure your Ehic card is in date at the time of travel. Can I emphasize that this is a FREE card if you apply through the official site (link above). There are sites that charge up to £50 to apply on your behalf if you do not use the official page. However, the cards do not need to be sent into school yet.

Could you also please confirm any food allergies that your child may have, as well as any ongoing medical treatment/prescribed medication that he or she takes. We have to inform the travel company in advance so that they can inform the hotel and airline appropriately. For example, if an epi pen is needed, the airline insists on receiving a letter from your child's GP at least one month before travel so that the epi pen can be taken into the cabin in case of emergency.

Yours faithfully,

Mrs S Brennan
MFL Coordinator

Please return this slip to the office by Monday 11th February 2019, together with the passport form and photos (With full name and date of birth on the back of the photo)

Name of Pupil _____ has the following food allergies / medical requirements:

Signed _____ Parent /Carer