

Our Ref: NDE/nky

10 May 2018

Dear Parent/Career

**RE: Duke of Edinburgh Royal Visit – Tuesday 26<sup>th</sup> June 2018**

Our DofE team here at the Academy have had the great pleasure of being invited to a Royal Visit that is taking place to promote all of the fantastic things our participants have been undertaking to achieve their Bronze Award.

The event will take place on Tuesday 26<sup>th</sup> June at the University of Hertfordshire. Travel to the University is provided and students are required to meet Miss de Laune in C6 at 8am to travel over to the University together via the school minibus. Students are asked to be in either school uniform, sports uniform for their physical (e.g. team kit for their football team) or in their DofE kit. Lunch is provided during the day. We will be returning to the Academy at approximately 3.30pm though if we are going to be much before or after this time, students will be advised to contact home.

Students are also asked to attend a brief meeting on Wednesday 23<sup>rd</sup> May during registration (8.30am) in C6 to discuss the skills, volunteering or physical activities they would like to showcase and how best to show these off to our Royal visitor.

Sadly, we cannot take all students to this event so we ask that if your child does not wish to attend that we are informed ASAP, so that their place can be offered to another participant. Please complete the attached reply slip and return to Main Reception by Friday 25<sup>th</sup> May.

Should you have any questions please do not hesitate to contact me.

Yours sincerely,

Miss N de Laune

DofE coordinator



**Permission slip – Duke of Edinburgh Royal Visit, Tuesday 26<sup>th</sup> June 2018**

*Please return this reply slip to Main Reception by no later than Friday 25<sup>th</sup> May 2018*

Student name: ..... Form: .....

I confirm my child will adhere to the academy's behaviour expectations for trips and visits and give permission for him/her\* to attend the above named trip.

Any medical information of which the school should be aware (i.e. allergies, medication)

.....  
.....

Signed ..... Parent/Guardian

Emergency Contact Number: .....

Date: .....

\*Please delete where applicable