

15th April 2024

Dear Parent/Carer

As part of a KS4 Enterprise programme, your child completed a survey about future careers and voiced their desire to work within Travel and Tourism. Working with the Travel and Tourism department, a visit to Manchester Airport has been arranged on Friday ,21st June. This visit will include a tour of the viewing park, a visit to the terminal and a lecture.

We will be departing on buses at 9.30 a.m. and leaving Manchester Airport at 2p.m. Students will need to be collected from school at around 3.15pm. This trip is **not compulsory** and your child can remain in school if they choose and will be in their lessons accordingly. Your child **will be required to wear uniform** on the trip. Please **provide a packed lunch** on the day. Pupils who receive free school meals can order a packed lunch to take by indicating on the reply slip.

Under the 1996 Education Act, the College requests a **payment of £14** if you wish your child to take part in this visit. The visit will only take place if there are enough payments to make the trip possible otherwise the trip will be cancelled and a full refund will be made. Please indicate your agreement to pay on the reply slip. You must pay for the trip online via <u>www.parentpay.com</u> and this can be paid in installments if needed. When on Parent Pay, you will be able to pay for the trip under the tab 'Payment Items'. If you have lost your original login details, please ask your child to visit the Finance Office to collect a new letter.

Please complete the attached permission slip Monday 27th May and return the slip to Miss Brittles or Miss Armstrong.

Yours sincerely

K Bríttles

Miss K Brittles Head of Enterprise

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Please return to Miss Brittles or Miss Armstrong

Year 10 visit to Manchester Airport

Student name: Form:		:
1.	I would like my child to attend the trip to Manchester Airport.	
2.	My child receives free school meals and will require a packed lunch	
3.	I will collect my child from school at 3.15 p.m.	
4.	I give permission for my child to make their own way home after returning t	to school
Pai	rent/Carer signature: Date:	

Name _



ST JOHN BOSCO ARTS COLLEGE

Telephone: 0151 330 5142 Email: enquiries@stjohnbosco.org.uk www.stjohnboscoartscollege.com Storrington Avenue, Liverpool L11 9DQ Headteacher: Mr Darren Gidman, BSc [Hons], NPQH