

19<sup>th</sup> June 2019



# Hollygirt

SCHOOL

**To: Parents of Pupils in Year 9**

Dear Parents

## **Super Physics Olympiad at Uppingham, Rutland**

Following last year's Year 9 excellent visit to the 'Super Physics' event, I would like to take a team of four Year 9 physicists to represent Hollygirt at the **East Midlands Super Physics 2019 inter-school competition** at Uppingham College, Rutland on **Friday 5<sup>th</sup> July 2019**. Over twenty schools from across the East Midlands took part last year.

On this day, the pupils will be presented with a series of science challenges and practical experiments, which will involve independent thinking and problem solving. The pupils will benefit enormously from this experience. They will present their findings on a poster and the day ends with an inspiring 'wow' lecture, which many former Year 9 have been impressed by.

The pupils will travel by staff car leaving school at **8.00am** and will return to school (approximately) **5.15pm**. Alternatively as in the last two years, we may be offered a lift by another school to go with them in their minibus. The cost for this trip is £7.50 and you can pay by cash, cheque or Bacs. If paying by BACS, please title your payment SURNAME/PHYSICS. Pupils will need to wear uniform and bring writing materials, ruler, calculator, a packed lunch and drinks.

Please complete and return the permission slip below to give your consent for your child to attend.

Yours sincerely

Dr D McKitterick  
Physics Teacher and Exams Officer



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Child's Name: \_\_\_\_\_

Form: \_\_\_\_\_

I give consent for my child to partake in the visit to **the Super Physics Olympiad 2019** on **Friday 5<sup>th</sup> July 2019** from **8.00am - 5.15pm**. I acknowledge the need for obedience and responsible behaviour on their part. I understand that there is some level of risk in every activity but that this visit will be managed to minimise the risks involved. I believe my child to be medically fit to undertake this visit.

Please tick one option below:

I enclose £7.50 cash     I will pay by BACS     I enclose a cheque for £7.50

I acknowledge the timings of the day and will arrange for my child's journey home from school at 5.15pm.

**Please note that this trip is not refundable and by signing the consent form, you are agreeing to the cost even if your child does not take part in the visit.**

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**Please return to Dr McKitterick asap**