



OLDMACHAR ACADEMY

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ABERDEEN
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Mrs J Mohamed
Headteacher

24 August 2017

Dear Parent/Carer

S3 Business Elevator Visit – Routine and Expected Trip

A Business trip has been organised to visit Elevator on Wednesday 30 August.

The 1 hour session will allow students to find out about Elevator and the work they do as an organisation; hear about business competitions and funding; gain tips on how to construct a pitch; carry out a business activity and increase their knowledge of business and enterprise.

Coaches will depart from Oldmachar Academy at 10.45 am to take pupils to the venue, returning to the school at approximately 12.15 pm. Pupils will be supervised by Miss K Rennie and Mrs T Heslop. In order to cover the cost of the coaches pupils are asked to pay £1.80 to the school office by Tuesday 29 August.

As this is an event where pupils will be representing the school, full school uniform should be worn.

I would be grateful if the reply slip below, as well as the attached V4 form could be completed and returned to either myself or Mrs Heslop by **Monday 28 August.**

Insurance information:

Aberdeen City Council provides off-site activities travel insurance cover for all insured persons (pupils, teaching staff, youth workers, support staff, adult volunteers, helpers, assistants and other authorised children) of participating schools and community groups whilst on organised visits outside the designated school boundaries. Further details can be found within the policy summary (appendix 13 of the Educational Visits Policy) which can be found online at: http://www.aberdeencity.gov.uk/AdventureAberdeen/scc_visits.asp

Yours faithfully

Ms K Rennie
PT Faculty of Technology

S3 Business Management Elevator Visit – Tear-Off Slip

Please sign and return this slip and the V4 consent form to Miss Rennie or Mrs Heslop by Monday 28 August 2017. Payment of £1.80 should be made to the school office by Tuesday 29 August.

Pupil Name: _____ Class: _____

I have read and understood the Aberdeen City Council Terms and Conditions and will inform the school of any changes to my emergency contact details and/or my child/ward's medical details.

Parent/Carer Name: _____ Date: _____