

## Newchurch Community Primary School

20<sup>th</sup> November 2017

Dear Parents

### Beeston Activity Trip Tuesday 10<sup>th</sup> July to Wednesday 11<sup>th</sup> July 2018

We are planning to take the Year 4 children to Beeston Outdoor Education Centre on 10<sup>th</sup> July. This is a residential visit and the children will be staying overnight at the centre and returning the following day at around 3.30 pm on Wednesday 11<sup>th</sup> July.

The children would be involved in a range of activities which will include a visit to Bunbury Mill, Team Games and a visit to Beeston Castle. The cost of the trip which includes return travel by coach, full board, accommodation, insurance and the full programme of activities will be **£77**

*To secure your child a place on the residential trip we ask for a voluntary contribution of a £20 deposit towards the cost of the coach and activities and the signed consent form to be returned to school by **January 26<sup>th</sup> 2018**. To help with your financial planning the remaining balance will be collected in 3 further payments as shown.*

<i>Payment Date</i>	<i>Amount</i>	<i>Outstanding Balance</i>
<i>January 26<sup>th</sup> 2018</i>	<i>£20</i>	<i>£57.00</i>
<i>March 9<sup>th</sup> 2018</i>	<i>£20</i>	<i>£30.00</i>
<i>April 20<sup>th</sup> 2018</i>	<i>£20</i>	<i>£17.00</i>
<i>May 25<sup>th</sup> 2018</i>	<i>£17</i>	<i>£00.00</i>

The children would need to bring a fully disposable packed lunch for the Tuesday (*no glass please*) but would be given all meals thereafter by the centre.

Please sign below if you would like to order a packed lunch from the kitchen and enclose £2.30 (unless your child is on free school meals or pays by direct debit.)

The **balance** should be sent in to school by **Friday 25<sup>th</sup> May 2018**, however to help spread the cost parents can send in additional payments beforehand and a payment plan can be set up for you.

Yours sincerely



Mrs Sara Lawrenson  
Headteacher

**Pupil Information and Consent Form**

**Beeston Activity Trip Tuesday 10<sup>th</sup> July to Wednesday 11<sup>th</sup> July 2018**

**Please return parental Consent Form to be returned by Friday 26<sup>th</sup> January 2018**

I agree to my child .....taking part in the residential visit to Beeston Activity Centre from 10<sup>th</sup> to 11<sup>th</sup> July 2018 and I am prepared to pay the sum of £77

**I enclose a £20 deposit**                      ☐ **Cash**                      ☐ **Cheque**

*(Cheques payable to Newchurch C P School)*

- ☐ I would like to purchase a school packed lunch and enclose £2.30
- ☐ My child is entitled to free school meals and would like a packed lunch
- ☐ I pay by direct debit and would like a school packed lunch
- ☐ I will supply my own packed lunch (no glass please)

I will not hold the Head responsible for any loss of personal effects or money incurred by my child during the visit where reasonable steps have been taken to safeguard such effects and money.

I agree to pay for any damage which may be occasioned through the misconduct or carelessness of my child to the person or property of any other party or parties.

I authorise a member of the school staff to consent to such medical treatment which, in the opinion of a qualified medical practitioner may be necessary for my child in the course of the school trip to Beeston Activity Centre.

Signed.....Parent/Guardian

Print Name .....

Date .....

**Pupil Information and Consent Form**  
**Beeston Residential July 11<sup>th</sup> – July 12<sup>th</sup> 2017**

Child's Name .....

Address .....

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Date of Birth ..... Tel. no.....

Emergency Telephone contact number if different from above.....

Alternative Emergency Contact Telephone Number .....

Name.....

Address.....

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Name, address and telephone number of your own doctor

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Telephone Number.....

Information of any special medicine or treatment which your child needs during their stay

**(Please contact school for a medication form.)**

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Does your child have any **specialist** dietary requirements, allergies, sickness when travelling, incontinence problems or other medical conditions.

Please give details

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