



Chestnut Lane School

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105 Chestnut Lane

Amersham HP6 6EF

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Website: <http://chestnutlane.bucks.sch.uk>

Headteacher: Mrs Gemma Rehal
BA (Hons) Primary Ed, PGCE SENCO

7 November 2018

Dear Parents

Year 1 Trip to Mop End – Friday 30 November 2018

We have arranged for Year One to visit Mop End on Friday 30 November. We will be exploring the woods and discussing seasonal changes to recap learning in Science. Children will have the chance to discover how animals and plants survive in the Winter. We are asking parents to make a voluntary contribution of £8.00 (subsidised by the school fund) towards the cost of the coaches.

The children will need to be in school for **8.30am** for registration as the coaches (Angel Executive Travel) will leave promptly. We will return to school by 2.45pm.

Children must come into school wearing school uniform. They should also bring a waterproof coat with a hat, wellingtons, or other appropriate outdoor footwear, scarfs and gloves as the children will be outside. Please leave book bags and additional belongings at home. You can choose to provide your child with a **disposable** lunch or order a packed lunch (that is disposable) from Dolce. (Please see the slip below.)

Please fill out and return the attached consent form, with the slip below along with payment to the school office by **Friday 16 November**. **It is important that you return the attached form to show that you have given permission for your child to go on the trip.**

We look forward to a great day!

Miss Begum and Miss Flitney

To School Office: Mop End on Friday 30 November

- I enclose £8.00 voluntary contribution towards the cost of the trip (cheques made payable to Buckinghamshire County Council).
- I will provide a packed (disposable) lunch for my child.
- I would like my child to have a packed lunch provided by Dolce.
- My child has the following dietary requirements _____

The packed lunch will consist of a bottle of water, a sandwich, a piece of fruit, cucumber and carrot batons and a piece of cake or biscuit.

Please choose ONE sandwich option:

- Cheese
- Tuna
- Chicken salad

Child's Name **Class**

Parent's Signature

PARENTAL CONSENT FOR A SCHOOL VISIT

Chestnut Lane Infant School



Pupil's name: Date of birth

Visit to: **Mop End, Amersham** From: **9am 30/11/18** to: **2.45pm on 30/11/18**

1. I agree to (Name) taking part in this visit and have read the attached letter. I agree to 's participation in the activities described. I acknowledge the need forto behave responsibly.

2. Medical information about your child

a. Any conditions requiring medical treatment? YES/NO

If YES, please give brief details:
.....

b. Please outline any medication your child may be given if necessary e.g. asthma inhalers, epi-pens etc

.....

3. Is your son/daughter allergic to any medication? YES/NO

If YES, please specify:
.....

4. When was the last time your child received a tetanus injection?

I will inform the Group Leader/Head Teacher as soon as possible of any changes in the medical or other circumstances between now and the commencement of the journey.

Signed: Date:

Full name (capitals):

Contact telephone numbers:

I may be contacted by telephoning the following numbers:

Work: Home:.....

Home address:

If I am not available at above, please contact:

Name:.....Tel No:.....

Name and address of family doctor:

Name:Tel No:

Address:.....

THIS FORM OR A COPY MUST BE TAKEN BY THE GROUP LEADER ON THE VISIT. A COPY SHOULD BE RETAINED BY THE SCHOOL.