



CHURCHFIELD CHURCH SCHOOL

Interim Head Teacher: Mrs J Venning



BATH & WELLS
Multi Academy Trust

'That they may have life, life in all its fullness' John 10:10

Burnham Road
Highbridge
Somerset
TA9 3JF

Website: www.churchfield.somerset.sch.uk

E Mail: office@churchfieldbwmat.org

Tel: 01278 782743

Fax: 01278 794458

Monday, 20 February 2017

Dear Parents and Carers,

As part of our topic on Rainforest this term, we would like to visit 'The Wild Place project' on Tuesday 28th March 2017. The trip will take place during normal school hours.

The children will be taking part in a workshop called 'Amazing Madagascar'.

The trip will be in normal school times and the children will need to wear their school uniform.

Children will need a packed lunch and sufficient drinks to last the day in a disposable plastic bag. If you have ordered a hot meal for your child online this will be automatically be adjusted to a packed lunch unless you inform the office. If you have not ordered online you will need to provide your own.

Please ensure your child has a suitable waterproof coat and sensible shoes. They should wear their school uniform.

Children who require travel medication will need to ensure that they receive it prior to coming into school, with the medication for the return journey being placed into a sealed envelope, clearly marked with your child's name and dosage required.

The parental contribution to cover the cost of coach travel, entry and workshop is £12.00. We must emphasise that should we not receive sufficient contributions, the trip will not take place.

Please pay online using your secure ParentPay account if possible.

Please complete and return your child's permission slip to the school office before Friday 17th March 2017.

Yours sincerely

Mrs Sturme
Year 3 Teacher

Mrs Waters
Year 3 Teacher

Churchfield Church School, Highbridge

The Wild Place Project Trip on Tuesday 28th March 2017

Name: Child's Class:

I wish / do not wish my child to take part in the visit to The Wild Place Project.

I have read, fully understand and am satisfied with the details supplied about the above-mentioned activity and agree to my son/daughter taking part in it. I know of no medical reason why he/she should not take part.

I am aware that:-

- 1) Except for visits abroad, insurance arrangements are the same as for students in educational establishments; i.e. that the Authority can only insure against the proven negligence by the Authority and/or its employees.
- 2) I should consider making my own insurance arrangements for personal accident cover for my son/daughter.

I have paid online through Parentpay

Signed: Parent/Carer Date:
