3rd July 2018

Dear parent/carer,

Regards

On Wednesday 18th July, we will be going to Ness Gardens for a 'Seasonal Treasures Welly Trek' and workshop. This is part of the children's discovering and learning about the natural world topic. During the workshop they will discover plants and animals as well as focusing on seasonal plant and weather changes.

We will leave school at 9:40 and we will arrive back at school at approximately 2.45pm. Children should have sun cream applied before coming to school and bring a hat and water bottle in case of warm weather / coat for wet or cooler weather. Sensible shoes (not sandals) should be worn to enable children to comfortably walk around the site. All children will require a packed lunch. If you would like us to provide that for you, please indicate on the reply slip.

The cost for this trip (bus and workshop) is £14.00 for each child. To assist with the costs we would like to ask for a **voluntary contribution of £7 per child**. This should be sent in with your permission letter by Friday 13th July. If enough contributions have not been made by this date, we will look again to see if it is cost effective to run the trip and may make the decision to cancel.

Mrs Blakemoore-Irving	
Ness Gardens: Wednesday 18 th July 2018	Voluntary Contribution £7.00
Child's Name:	
I give permission for my child to participate in the visit to Ness garde	ens
 My child has no known medical conditions / allergies OR My child has the following medical conditions / allergies: 	
> I would like you to provide a packed lunch YES / NO	
Signed: Parent/Carer Date:	
PRINT NAME:	
Emergency Contact No. (for this trip):	
Declaration:	

I understand that the teacher in charge of the group will be acting in 'loco parentis' and in the event of an accident I agree

considered necessary by the medical authorities present. I understand that the Metropolitan Borough of Wirral is insured

Please Note: Details disclosed on this form will be used to ensure our electronic records are up to date for future use.

to my child receiving emergency treatment which may include the use of anaesthetics and blood transfusions, as

OFFICE USE ONLY

PAYMENT REC'D:

Should conditions change, please inform us in writing.

DATE:

in respect of its legal liabilities only, and that there is no personal accident or other cover.

INITIALS: