

## “a church school for the whole community”



**Head Teacher: David Heather**  
Pulford Church of England V.A. Lower School  
Pulford Road  
Leighton Buzzard  
Bedfordshire  
LU7 1AB.  
E-mail [office@pulford.cbeds.co.uk](mailto:office@pulford.cbeds.co.uk)  
[www.pulford.beds.sch.uk](http://www.pulford.beds.sch.uk)

**Telephone (01525) 372188**  
**Fax (01525) 378984**

### **OAK AND SILVERBIRCH TRIP TO ASHRIDGE** **WEDNESDAY 9<sup>TH</sup> MAY 2018**

Dear Parents

We have arranged a trip to Ashridge for the Year R children. We plan to leave school at 9.15am (usual 8.50am drop off at school please) and then return in time for you to collect your child at 3.30pm as normal from school.

#### Clothes

The children will not be expected to wear school uniform. They will need long sleeved tops and weather appropriate coats. Walking boots are ideal, if not trainers if we have had dry weather, wellies if it has been wet.

#### Food

If your child normally has lunch (hot or otherwise) from school on a Wednesday, our 'Clotomus Kitchen' will supply a packed lunch for your child. This will include a roll (either ham or cheese filling), a piece of fruit, a savoury snack, a cookie/biscuit and a bottle of water. However, if you would like to make your own 'pack up' for your child, that is also fine. **Please mark your preferences on the return Consent / Information Form attached.**

#### Medication

If your child suffers from travel sickness please give them a tablet before leaving home. Should they require a tablet for the return journey please put the tablets and their container with instructions in a named envelope. These will be handed to Mrs Marchant, our emergency first-aider, and will be administered at the appropriate times.

*If your child requires the above medication or any other, please ensure that you have given the necessary detail and signed the appropriate permission slip on the parental consent form.*

#### Cost

The cost of the trip is £11 per child. This amount covers the cost of the coach, Art Attack session and climbing the tower. Although the contribution is not compulsory and children of parents who do not contribute will not be discriminated against, the visit may have to be cancelled if there are not enough voluntary contributions and the shortfall cannot be made up. I hope that you will be willing to allow your child to participate in this outing. If you have any further enquiries please do not hesitate to contact us. **Please return the signed permission slip with any relevant information, and your voluntary donation, by Friday 30<sup>th</sup> March. You can pay cash, cheque or card.**

Yours sincerely

Mrs Kirk / Miss Grinyer

PLEASE RETURN THIS FORM BY FRIDAY 30<sup>th</sup> MARCH AT THE LATEST.

OAK & SILVERBIRCH TRIP TO ASHRIDGE

## PARENTAL CONSENT FORM

I am willing that my child ..... in OAK / SILVERBIRCH (delete as appropriate) shall take part in the visit/journey to Ashridge on Wednesday 9th May and having read all the information sheet, I agree to his/her taking part in any or all of the activities described.

I understand that, while the supervisory adults in charge of the group will take all reasonable care of the young person, neither they, nor the Central Bedfordshire Authority, can necessarily be held liable in respect of loss of or damage to property or injury suffered by my child arising out of the educational visit/journey, unless such loss, damage or injury results from the negligence of Authority, its employees or official volunteers.

I agree to my son/daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.

My child does/does not require travel sickness medication and I /do not give permission for Mrs Marchant to administer these.

Any other medication – please specify .....

Voluntary contribution of £..... is enclosed. Cheque/cash/card via office(delete as necessary)

Signed (Parent/guardian)..... Date .....

Emergency Contact Number for this day are .....

### LUNCH ARRANGEMENT

**(Please tick ONE of the boxes below)**

My child normally has a dinner from your kitchen on a Wednesday; please can you supply a 'grab bag' lunch instead for the trip. *Ham or Cheese (delete as appropriate)*

**OR**

I will provide my child with a packed lunch for the trip. (No fizzy drinks or sweets.)