

Dear Parent/Carer

10th January 2014

Year 3 - School visit to Sunderland Museum and Winter Gardens.

Mr McDermott, Mrs Turner and Mrs Nisbet have planned a school visit to the Sunderland Museum and Winter Gardens on the 27th of January 2014. The main purpose of the school visit is to further enhance the children's learning about the new rainforest topic starting this term. During the trip to the museum, the children will have the opportunity to experience a learning workshop led by museum staff, which will focus on the basics of rainforests such as the layers of a rainforest and the various plants and animals to be found in this ecosystem. In addition to this the children will explore the rest of the museum under the supervision of the teachers.

In accordance with the 1988 Education Reform Act we can only ask for a **voluntary contribution of £2** to cover the cost of the transport. Please make your contribution via the [ParentPay website](#).

For those who are eligible for free school meals there will be no charge.

All children must wear their full school uniform and school shoes as the journey to the museum is on foot. The children will also need to ensure that they have brought a warm and water proof coat. Hats and gloves are also advisable. We will be leaving school promptly at 9.15am and we will return to school at 3.15pm. Therefore all children will need to bring is a packed lunch. If your child receives a free school meal and you would like the school to provide a packed lunch for them then you must inform the office by the 20th of January.

Each class will need 3 volunteers for the visit. If you are able to join us then please speak to a class teacher.

Please complete and return the consent form below by Friday the 17th of January.

Yours sincerely

Mrs J Bayes
Headteacher

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THE FOLLOWING INFORMATION MUST BE GIVEN - To go on the visit to the Winter Gardens, Sunderland

I give permission for my child..... Class.....
Emergency Contact at time of trip (please print)

Name..... Relationship.....

Tel No..... Date.....

Any Medical condition.....