

Rye Community Primary School & Starfish Pre-school The Grove, Rye, East Sussex TN31 7ND www.ryeprimary.co.uk



Headteacher: Miss Kelly Martin office@ryeprimary.co.uk
01797 222825

6.03.2024

Dear Parents and Carers,

The year 3 and 4 team are excited to announce that we will be visiting the British Museum in London at the end of this term. This is an exciting opportunity for us to celebrate the learning we have been doing about the Ancient Greeks, and prepare for our upcoming topic on The Romans.

We will be travelling by coach, leaving school at 8:00am and returning by 5:00pm. The children will need to wear full school uniform, a coat and a backpack, as they will be carrying their lunch with them. Please avoid chocolate and sweets as we want to avoid children feeling unwell on the coach.

We require consent to take your child on the trip; children without consent will be unable to attend. We are asking parents/carers to make a voluntary contribution of £20 towards the cost of the visit. As with all additional experiences, if we do not receive enough voluntary contributions, then the trip may have to be cancelled. You can pay online via ParentPay (the web-based system we use to pay for school meals). We are happy to receive instalments of any amount in advance of the trip, we are also happy to receive money after the trip date as we realise that this opportunity has been sprung upon us, but it was too good to miss!

We hope you will support us in enabling our children to explore the history of Britain

Best Wishes, The year 3 and 4 team

| Date | Tuesday 26 th March 2024 | | | |
|--------------------|--|--|--|--|
| Time | 8am collection from school, Approx 5pm return. | | | |
| Venue | British Museum, London | | | |
| Transport | Coach | | | |
| Clothing | Full school uniform | | | |
| Other items needed | A back pack with a packed lunch, healthy snack and water bottle. | | | |
| Cost | £20 | | | |

Please complete and return to school by Tuesday 19th March 2024.





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| give permission for my child | | (Name) to take part in the trip to The British cost of the trip. | | |
|--|----------------|--|-------------------------|--|
| ภินรeum on <mark>Tuesday 26th March 2024</mark> | | | | |
| have paid £ online on Paren | tPay for the c | | | |
| Лу child is entitled to Free School Meals and v | vould like a p | acked lunch prov | rided by the canteen. | |
| ignedPa | arent/Guardia | an | | |
| | Medica | <u>l</u> form | | |
| Does your child suffer from any alle or disability? | ergy, illness | Yes □ | No □ | |
| If yes please provide further details, in | cluding any p | rescribed medica | ation, times and doses. | |
| | | | | |
| Do you consent to your child receive during the school trip? | ing first aid | Yes □ | No □ | |
| Do you consent to your child receive care during the school trip, includire of anaesthesia, if deemed necessare medical professionals? | ng the use | Yes □ | No □ | |
| I can confirm that the information I happy for my child to receive first a activity. | | | | |
| Name of parent | | | | |
| Emergency contact number one | | | | |
| Name of contact | | | | |
| Emergency contact number two | | | | |
| | | | | |
| By signing this form, I agree to the participate in all of the listed schoo | | ed in the letter t | | |
| Name of pupil | | | | |
| Year group | | | | |
| Name of parent | | | | |
| Signed | | | | |
| Date | | | | |

