



# Alexander Hosea Primary School

*'Roots to grow, wings to fly'*

Honeyborne Way, Wickwar, South Gloucestershire, GL12 8PF

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Headteacher: Mrs D Williams



Date: 7 December 2018

Dear Parents/Carers

## **SCHOOL VISIT**

A visit has been arranged for your child, details below:-

<b>TRIP VENUE:</b>	<u>Bath Theatre Royal</u>
<b>LEARNING INTENTION:</b>	<u>Peter Pan</u>
<b>CLASSES:</b>	<u>Emerald</u>
<b>DATE OF TRIP:</b>	<u>Thursday 10 January 2019</u>
<b>TIMES:</b>	<u>12.30-5.30pm</u>
<b>COST:</b>	<u>£17.00</u>

A packed lunch will be required to be eaten before leaving. Alternatively, children can order one from school. School uniform should be worn with warm waterproof coat. The cost of the trip is £17.00 which covers transport and admission to the Theatre. We have used proceeds of the Christmas Fair to reduce the cost. Contributions are voluntary but if a significant number of parents do not pay the trip will have to be cancelled. Please could parents in receipt of income support contact the office. Payments can be made via Sims Agora, our online payment system, please contact office if you require a reminder of your reference. Details of school journey insurance cover are available from the office.

4 parent helpers are needed on this visit, however, we are asking for payment of £13.50 for the ticket for helpers. **Payment for this will be requested at a later date** when all the permissions are received. Please indicate below if you are able to help. I should be grateful if all payments and permissions are returned by **Thursday 20 December**

Yours sincerely

**Class Teacher**

✂.....

**SCHOOL VISIT TO: Bath Theatre Royal – Peter Pan Date: 10 January 2019 Class: Emerald**

I give permission for ..... to go on the school trip .....

Child's Class: .....

**I have paid £..... On Sims Agora..... (Date)**

I am able to help with this visit and can contribute £13.50 towards ticket: (Yes/No)

My child will require a school packed lunch :.....( Yes/No)

Medical information the school should be aware of:

.....

Parent's medical needs if helping on trip.....

**SIGNED:** ..... (Parent/Carer)

**DATE:** .....



