



# The Federation of the Church Schools of Shalfleet and Yarmouth Achieving Together for a Brighter Future

The purpose of the Federation of the Church Schools of Shalfleet and Yarmouth is to educate children in an atmosphere of Christian love where all achieve the very best they can, now and throughout their lives

**Headteacher Shalfleet and Yarmouth: Mrs Elizabeth Grainger BEd English (Hons)**

A University of Chichester  
ITT Partner School



## PLEASE KEEP THIS SECTION FOR YOUR RECORDS

16<sup>th</sup> June 2022

Dear Parent/Carer

To compliment our topic we would like to take Year 2 to Blue reef in Southsea. Please find below the details:

Date of Trip	Monday 11 <sup>th</sup> July 2022
Itinerary	Due to lack of coach availability, we have been unable to arrange transport. Therefore, please drop your child to the hovercraft carpark in Ryde at 8.50am. The children will be catching the 9.15am hovercraft to Southsea, to visit the Blue Reef Aquarium. We will return on the 2.45pm hovercraft back to Ryde. Please can you collect your child from Hovercraft carpark at 3pm. <b>Please contact the school office if you are unable to transport your child to and from Ryde. The office will try to arrange a taxi or minibus (at an additional cost).</b>
Lunch arrangement	Please ensure your child has a packed lunch and a bottle of water.
Dress code	School top half, sensible bottom half. Sensible footwear.
Spending money	£5
Any other relevant information	Please ensure they are wearing sun cream and a hat or a raincoat (weather dependant)
Cost of trip	£20.38

**PLEASE MAKE SURE THAT YOU CHECK YOUR MOBILE PHONES AS ANY TRAVEL UPDATES WILL BE SENT VIA DOJO'S.**

If you are happy for your child to attend, please complete the permission slip below and return to School by Monday 4<sup>th</sup> July 2022 at the latest. We will then assess money received against the cost of the trip to ensure that the visit is financially viable for the school to run.

Please be aware that normal school behaviour expectations apply to all trips.

Yours sincerely

Mrs Jones  
Year 1 class teacher

Shalfleet CE Primary, Station Road, Ningwood, Newport, Isle of Wight. PO30 4NN

Tel: (01983) 760269 Email: [shalfleet@fosay.co.uk](mailto:shalfleet@fosay.co.uk)

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PLEASE COMPLETE THE INFORMATION BELOW AND RETURN TO THE SCHOOL OFFICE  
Cove class to Blue Reef Aquarium

### MEDICAL INFORMATION

Child's Name ..... My emergency contact number for this day will be

My child does not have any diagnosed medical conditions

My child has been diagnosed with the following medical conditions:  
.....  
.....  
.....

My child does not need any medication

My child will need the following medication: .....

I give school my permission to administer the following dosage

Dosage: ..... Time to be administered: .....

Action to be taken in case of an emergency .....  
.....  
.....

The school should have the above medication  I will bring in the medication ready for the trip

### LUNCH INFORMATION

Please supply my child with a Universal Free school packed lunch

I will provide my child with their own packed lunch.

### PERMISSION

**I am happy/not happy** for my child to participate

**I give/do not give** permission for my child to be photographed whilst on this school trip/off site activity.

Signed (parent/guardian) ..... Dated .....

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## DECLARATION – PLEASE READ AND DELETE WHERE APPROPRIATE

I agree/do not agree (**please circle as necessary**) to my child receiving medical care if required. This would include first aid and any emergency dental, medical or surgical treatment as considered necessary by the medical authorities present, in his/her best interest.

I give permission/do not give permission (**please circle as necessary**) for my child to be photographed/filmed during this visit/activity (for possible use in displays/presentations & press releases).

I consent to my child taking part in this activity/visit, including any or all of the activities described.

I understand that all reasonable care will be taken of my child during the visit/activity and that he/she must follow all directions and instructions given, as well as all rules and regulations concerning the visit/activity.

I understand that if my child seriously misbehaves or is a cause of danger to him/herself or to others, then he/she may be sent home early from the visit/activity. In such a situation, the school will not be required to refund any money.

I understand that all visits are covered by public liability insurance. I understand the extent and limitations of the insurance cover provided & that the school staff in charge of the group will take all reasonable care of my child's property, so they cannot necessarily be held responsible for any loss or damage suffered by my child during the visit. I can contact the school if I need further details.

Full name of parent/carer (print please): \_\_\_\_\_

Signed \_\_\_\_\_ Date: \_\_\_\_\_

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