

LIONEL WALDEN PRIMARY SCHOOL



Headteacher - Mrs Sally-Anne Barnard-Taylor

High Street Doddington March Cambridgeshire PE15 OTF 8th May, 2017

Dear Parents,

Tel: 01354 740405 Fax: 01354 741514 Email: office@lionelwalden.cambs.sch.uk Website: www.lionelwalden.cambs.sch.uk

We are planning an educational visit for Class 1 on Thursday, 15th June to South Angle Farm Park at Soham, near Ely. South Angle Farm Park has been specifically developed as an educational resource, covering topics including animals, farming, food production, habitats and the environment. The children will have a tour of the farm, meet all the animals and also learn about the different types of food grown. If you would like more information about South Angle Farm Park, please see <u>www.southanglefarmpark.co.uk</u>. The coach will leave and return within the normal school day.

Children will need to bring a packed lunch as well as a small snack for mid-morning. Children may wear non-uniform clothes, which are suitable for a school visit, and sensible footwear, e.g. trainers. If the weather is wet, a waterproof coat is advisable. Sunhats and sun cream should be worn if hot weather is forecast. Please let us know if your child suffers from travel sickness, or any other medical condition, which may affect them on this visit.

In order for this trip to go ahead, a contribution of £16.50 per child is required. This covers the cost of coach travel, entrance to the park and teaching activities. If insufficient contributions are received, unfortunately the trip will not take place. Please complete the form below and return to school together with your contribution by Monday, 5th June. Any contributions will be refunded in full should the trip be cancelled. Any cheques should be made payable to Lionel Walden School.

Yours sincerely,

<u>E. Riches</u> (Mrs.) Class Teacher			
<u>Class 1 Trip to South Angle Fa</u>	<u>m Park on 15th June, 2017</u>		
Name of Child:			
I would like/not like* my child	to take part in the visit to South A	Ingle Farm Park.	
I enclose my contribution of £	16.50 Medical Information:		
Signed:	(Parent/Carer)	* Please delete as necessary	
Name:	(Please Print)		
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