Christchurch Primary School
(Church in Wales Voluntary Aided)

Headteacher: Mrs Helen-Marie Davies, B.Ed., M.Ed.

Friday, 28th June 2019

Dear Parent/Guardian,

As part of your child's education, Key Stage 2 will be visiting the Swansea 1940's War Museum, Jersey Marine on **Wednesday, 10th July 2019**. There will be a charge of **£10.00** to cover entry to the museum and the coach.

They will learn about what life would have been like in the 1940's. We would like the children to dress up as evacuees.
Suggestions; Boys – flat cap, short trousers, tank top and shoes
Girls – pinafore dress, pigtails, tights and shoes.

We will be leaving school at **9.30am** and will return to school in time for the end of the school day. Your child will need a packed lunch.

(If you are in receipt of free school meals and would like to request a packed lunch, you must order it in the office 3 days before the trip).

Please complete and return the attached consent form by **Friday, 5th July2019.** Payments can be made on Squid or cash sent into school in a sealed and labelled envelope.

If we do not receive your consent form, your child will not be able to go on the trip. If you have any queries, please contact the office.

Diolch yn fawr,

Mrs H M Davies
Head teacher

Address: Rodney Street, Sandfields, Swansea, SA1 3UA
Email: christchurch.primary@swansea-edunet.gov.uk
Website: www.christchurch.swansea.sch.uk
☎ 01792 510900

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Venue	**1940's War Museum, Jersey Marine**
Date	**Wednesday, 10th July 2019**
Name of Pupil	
Emergency contact 1	
Name	
Address	
Phone Number	
Emergency contact 2	
Name	
Address	
Phone Number	
Family Doctor	
Name	
Address	
Phone Number	
Medical Information	
Does your child suffer from any medical conditions requiring medical treatment, including medication?	**Yes/No** **(If so, please give brief details)**
Please outline any dietary requirements of your child	
I agree to my child taking part in this visit and have read the information. I agree to his/her participation in any or all the activities described. I acknowledge the need for responsible behaviour on his/her part. I agree to my child receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic, as considered necessary by the medical authorities present.	
SIGNED: **DATE:**	

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