



Mr. Gary Spracklen - Headteacher (@Nelkcarps)



Maiden Castle Road, Dorchester, Dorset. DT1 2HH



01305 257120



office@princeofwales.dorset.sch.uk



<http://www.princeofwales.dorset.sch.uk>

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Wednesday 8th November 2017

Dear Parents

BOVINGTON TANK MUSEUM – YEAR 4

On Monday 27th November we will be visiting Bovington Tank Museum to participate in World War 2 education workshops.

We will depart at 9.15am and will travel by coach. We will be taking our packed lunch with us and eating at the museum. Please provide your child with a snack and a packed lunch in a named backpack and plenty to drink. Hot lunches will be cancelled on the day so if this is a day your child normally has a hot dinner please provide a packed lunch instead. For children on free school meals a packed lunch will be provided.

Children will need to wear their school uniform on the day.

We would like to ask for a voluntary contribution of £10.00 per child to cover the cost of the coach hire and entry to the museum. If you are unable to contribute the full amount please consider giving what you can. No child will be excluded if a contribution is not received. If you are able to contribute more towards the cost of the trip this will help us to ensure that the trip is viable and able to run.

Please sign the attached slip giving permission for your child to participate in the visit. If you have any further questions please do not hesitate to contact me.

The school welcomes any feedback from parents on educational visits; please feel free to email the office on office@princeofwales.dorset.sch.uk.

Yours sincerely

Sam Johnson

Class Teacher



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Bovington Tank Museum - Year 4

I give permission for my child _____ to participate in the visit to Bovington Tank Museum on Monday 27th November.

I enclose a voluntary contribution of £10 or ____

I agree to reinforce the need for my child to follow the school's code of behaviour.

To help with safety all participants are expected to behave in a responsible manner at all times during the event. They must take direction from any leader and follow all instructions or guidance given.

Emergency Contact Name on the day: _____

Emergency contact name's telephone number for the day: _____

Signed: _____ Date: _____

Parent/Guardian



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