



Claverley Church of England Primary School

Aston Lane, Claverley, Wolverhampton WV5 7DX

Tel/Fax: 01746 710636

Headteacher: Mrs J Derrer

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Website: www.claverleyprimary.org.uk

Dear Parent/Carer

10th September 2024

Visit to Severn Valley Country Park

We are delighted to have organised a trip for Year 1 and Year 2 on Tuesday 24th September. As part of our science topic we are going to the Severn Valley Country Park and will take part in mini beast hunting and pond dipping.

Children should wear old trousers, school uniform tops, wellies and will need a waterproof coat. We will leave school at 9.15am and will return for the end of the school day.

Under the Universal Infant Free School Meals for KS1, your child is entitled to a free lunch each day. As this is a whole day visit the kitchen are able to provide your child with a packed lunch, but if you would prefer to provide your own please state on the attached packed lunch order form.

We are requesting a voluntary contribution of **£7.50** per child towards the transport, with the PTA covering the cost of the activities. Under the requirements of the Education Act 1996 we can only raise the cost of this activity by voluntary contributions. There is no obligation to contribute and your child will not be treated differently according to whether or not any contribution has been made. However, the activity can only go ahead if the level of financial support is sufficient.

Please can you indicate on the slip below, if you can help on the day? We hope the children will find this an educational, fun and enjoyable day. Please complete and return the slip to school by **Monday 16th September.**

Payment by bank transfer using the following details:-

Account Name - Claverley CE Primary School

Account No – 43774663

Sort Code – 30-99-50

Kind regards

Miss Pinches



Visit to Severn Valley Country Park

I give my consent for _____ to visit Severn Valley Country Park

I have made the voluntary contribution of £7.50 Please tick

I have ordered a school packed lunch and returned the form **YES / NO**

OR I will provide my child with a packed lunch from home **YES / NO**

I am able / unable to help on the visit (Enhanced CRB Disclosure is required)

I **GIVE** permission for photographs to be taken of my child **YES / NO**

Signed: _____ Date: _____

Emergency Contact No: _____ Medical Conditions _____

In the event of an emergency, I give permission for the administration of anaesthetic and medical treatment until loco parentis is absolved **YES / NO**