

## **Garlinge Primary School and Nursery**



## Year 2 Trip to Wildwood Wildlife Park Tuesday 2<sup>nd</sup> July 2019

Monday 3<sup>rd</sup> June 2019

Dear Parent and Carers,

We have planned a visit to **Wildwood Wildlife Park on Tuesday 2**<sup>nd</sup> **July 2019**. This will give the children a wonderful opportunity to see many different animals and plants in their habitats. This links with the science units that we have been studying and will be looking at in Term 6.

The children will require a packed lunch. If your child is entitled to a free school meal please indicate on the slip below if you would like a packed lunch provided by the school. Please remember that <u>no</u> fizzy drinks, sweets, chocolate or yoghurts should be included in packed lunches. All packed lunches should be brought in a named carrier bag so it can be disposed of after. The children do not need any spending money as we will not be visiting the shop.

We are always grateful for parental help on these occasions, so if you are able to help please indicate on the slip below and we will be in touch with you.

Please ensure your child is wearing their school jumper and t-shirt along with suitable trousers/shorts or leggings for the visit with sensible shoes, named hats, gloves, coats and wellingtons if it is raining (it will be very muddy!).

Although the cost is covered by the school we will still need you to complete the permission slip below and return it to school by **Monday 17**<sup>th</sup> **June.** 

We are looking forward to an exciting day where the children will be given many opportunities to explore different habitats and take part in interactive workshops. We will be returning to school at the normal time.

Yours faithfully

Mrs Wasway, Miss Beaumont, N	∕Ir Bentlev.	Mrs Warr	۲.
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Year 2 Teachers.

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I give permission for my child Wildwood Wildlife Park on Tuesday 2 <sup>nd</sup> .	in class to go July 2019.	to		
I would like a packed lunch provided. $\Big[$	I am able to help on the day.			
I agree to my son/daughter receiving medicine as instructed and any emergency dental, medical or surgical				
treatment, as considered necessary by the				
Including Anaesthetic or Blood	d Transfusions (Please tick)			
Signed	Parent / Carer			
Please Print Name				