

ASQUITH PRIMARY SCHOOL & NURSERY
Asquith Street Mansfield NG18 3DG
☎ 01623 454969

6 June 2022

Dear Parents/Carers

On Tuesday 28th June 2022 we would like to take all Reception children on a trip to Willow Tree Farm at Shirebrook.

We will be leaving school promptly at 9.30am. We will return at approximately 2.45pm. Please send your child to school in appropriate clothes for visiting a farm, sensible footwear, and a waterproof coat. We ask that children wear their school shirt and jumper/cardigan. If the weather is hot please make sure your child has a hat with them and sun cream applied.

VERY IMPORTANT- All reception children are entitled to a free packed lunch. Please remember that there is no drink provided with the free packed lunch, we ask that all children bring a water bottle. Please ensure that you confirm your child's lunch requirements on the attached form, so that the kitchen can order the food required.

Please complete the attached permission form and return to school by Tuesday 14 2022.

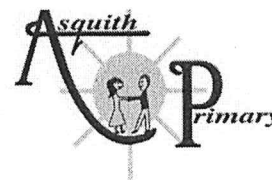
The cost of this trip is £12.60 per child. School is subsidising the trip, we are therefore asking parents to pay a contribution of £3. Payments should be placed in an envelope clearly marked with your child's name. Please return the attached consent form along with your contribution by Tuesday 14 June 2022

Yours faithfully

C HARDING
HEAD TEACHER

WILLOW TREE FARM

SCHOOL VISIT PERMISSION FORM



Date	Leaving school at:	Returning to school at:	Mode of transport:
Tuesday 28 June 2022	9:30am	Before 3:15pm	Coach

Name of child:	Date of birth:	Class:	Home address including post code:

GP (Doctor) INFORMATION:

GP Practice/Surgery	GP Name	GP Telephone Number

CURRENT MEDICATION DETAILS

Name of Medication	Dosage	Method of administration	Times/circumstances to be given

MEDICAL DETAILS

Detail all allergies:

When did your child last receive a tetanus injection?

DIETARY NEEDS

Detail any dietary needs:

I give permission for my child to be photographed during the visit and understand it may be used by school and partner organisations for their wider use, such as (but not limited to) websites, social media sites and local press.

Please circle
Yes / No

I give permission for my child to be filmed during the visit and understand it may be used by school and partner organisations for their wider use, such as (but not limited to) websites, social media sites and local press.

Please circle
Yes / No

My child will require a FREE school provided packed lunch

Please circle
Yes / No

If you have chosen for your child to have a school provided packed lunch, please tick below which sandwich fillings your child likes.

Tuna ☐ Egg ☐ Ham ☐ Cheese ☐

I agree to my child receiving emergency medical treatment, including anaesthetic and blood transfusions as considered necessary by the medical authorities present.

I undertake to inform the school of any changes, as soon as possible, to the medical and contact details provided on this form.

EMERGENCY CONTACT – (details of person who should be contacted in case of an emergency during the trip)

Emergency Contact Name	Relationship to Child	Contact Telephone Number

I give permission for my child to take part in the above mentioned visit.

PARENT/CARER DETAILS

Contact Telephone Number 1	Contact Telephone Number 2	Work Telephone Number

Address:

Name	Signature	Date