

WEST SUSSEX COUNTY COUNCIL
SOUTHBOURNE JUNIOR SCHOOL

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Headteacher : Mrs L. Gasser, BEd (Hons), NPQH

6th September 2023

Dear Parents and Carers,

As part of our Autumn topic 'What is a river?', we are arranging a visit to RSPB Pulborough Brooks on Friday 22nd of September. During the visit, the children will take part in a workshop to enhance their understanding of rivers and their importance for the local environment. This is an exciting way to immerse children in their learning and help them to develop their knowledge about our local geography.

Please provide your child with a packed lunch and plenty to drink - no fizzy/ energy drinks. **If your child is eligible for a Free School Meal and you would like to order a school packed lunch you can do this through the Parent Pay ordering system – please speak to the school office if you are unsure. Free School Meals packed lunch for the trip will need to be booked on Parent Pay by Thursday 7th September.**

Your child will need to wear a school uniform for this visit, however we suggest that they wear footwear suitable for walking, such as trainers. Please also ensure your child is wearing suncream and that they have a bag in which they can carry their lunch.

We are asking for a voluntary contribution of £17.85 to include coach travel and the workshop at the venue, which is led by experienced and knowledgeable staff. Please return the permission slip and contribution to the office in a named envelope by Monday 18th September. **Please note that if we do not receive sufficient funds the trip will be cancelled.**

If you have further questions, please contact your child's class teacher.

Yours sincerely,
Miss Duncan and Mr Harper

Y5 Visit to RSPB Pulborough Brooks – Friday 22nd September 2023

I am willing for my child _____ in Class _____
to take part in the above visit.

I understand that, while the school and helpers in charge of the party will take all reasonable care of the children, unless they are negligent they cannot be held responsible for any loss, damage or injury suffered by my child arising during or out of the journey.

My child has * no illness or physical disability
* the following illness or physical disability: _____
which necessitates the following medical treatment: _____

I consent to any emergency medical treatment necessary during the course of the visit.

Signed: _____ Parent / Guardian. Date: _____
Contact telephone number _____