Headteacher

John Galvin

Petworth CofE Primary School

South Grove, Petworth, West Sussex, GU28 0EE

Tel: 01798 342369 **Fax:** 01798 343195

E-mail: offfice@petworth.w-sussex.sch.uk **Website:** www.petworth.w-sussex.sch.uk



13th March 2017

Dear Parents/Carers,

As part of our learning experience on 'Light and Shade' we will be visiting Chichester Museum and taking part in a workshop on space exploration. During the course of the day, the children will have the opportunity to find out about the practicalities of life on board a space shuttle as well as exploring the other museum exhibits.

After having visited the museum, the children will walk across to Chichester Cathedral where they will be able to deepen their understanding of places of worship.

This trip has been subsided by the school and we therefore ask you for a donation of £9 in order to cover the remainder of the cost. This includes the cost of the workshop and the coach travel to and from the museum.

The children will need to bring a **packed lunch** with them in a backpack which they can carry themselves and will need to wear **school uniform** so that they can be easily identified. They will also need a **warm waterproof coat** for the walk between venues.

Children will be back at school at around 2pm, so can be collected as usual. We are looking for parent helpers for this visit, please indicate on the attached form if you are able to help on the day.

Please complete the form below with the £9 donation no later than Friday 17th March.

If you have any questions about the trip, please feel free to come and speak to me.

Thank you for your support.

Yours sincerely

Rob Neary

Beech Class Teacher

Chichester Museum and Cathedral Visit on the Thursday 30th March 2017

Please return this slip together with money and consent form to the school office by Friday 17 th March 2017
Name of child
I enclose the amount of £9.00 for the visit to Chichester Museum and Cathedral
Name of parent
*I am able/not able to help on the trip to Chichester Museum/Cathedral on Thursday $30^{\rm th}$ March.
*Please delete as appropriate
SignedDate

PETWORTH CE PRIMARY SCHOOL CONSENT FORM FOR VISIT TO CHICHESTER MUSEUM/CATHEDRAL ON THURSDAY 30^{TH} MARCH 2017

I wish my son/daughter(name)	
to be allowed to take part in the above mentioned school visit and having read the informal letter, agree to him/her taking part in any or all of the activities mentioned.	tion
I have ensured that my child understands that it is important for his/her safety and for the sa of the group that any rules and any instructions given by the staff in charge are obeyed.	ıfety
I understand that, while the school staff and helpers in charge of the party will take all reason care of the children, unless they are negligent they cannot be held responsible for any lamage or injury suffered by my son/daughter arising during or out of the journey.	
(Note: A School Journey Insurance Policy of Chartis Insurance UK Ltd is available through V Sussex County Council)	Vest
Please delete and complete the following as is appropriate.	
My child has: no illness, allergy or physical disability the following illness or physical disability * Cross out which does not apply *	
which necessitates the following medical treatment: Learnest to any emergency medical treatment pagescent during the course of the event.	
I consent to any emergency medical treatment necessary during the course of the event. Signed Parent/Guardian	
SignedParent/Guardian	
Address HOME WORK	
Tel. No. HOME WORK	
If not available at the above, please state an alternative contact:	
NameTel. No	-