



Reculver Church of England Primary

School

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Headteacher: Mrs Jenny Ashley-Jones BA Ed (Hons)

Deputy Headteacher: Mrs Stella Collins BA (Hons)

Friday 20th January 2017

Dear Parents/Carers,

We are very excited to inform you that we have been able to confirm our trip to the Houses of Parliament in London. The trip will take place on **Monday 20th February 2017**. We will be travelling by coach and will need to leave school by 7:45am. Because of this we ask that the **children arrive at school by 7:30am at the latest**. We aim to return by 5:30pm dependent on traffic. We will keep you updated on our progress.

We will also be visiting the secret WW2 bunker and museum that tells the story of Winston Churchill's life and legacy.

The cost of the trip will be **£14.50 per child**. Please sign the permission slip below and complete the payment via Parent Pay or request a bar coded letter to pay through Pay Point, by Wednesday 1st February 2017. Please note no pocket money is required for this trip.

Children will be required to wear school uniform and bring a packed lunch, preferably in a disposable bag. If you are entitled to Free School Meals we can order a Free Packed Lunch for your child should you wish. Please complete the attached form.

Please ensure your child brings with them any required medication and gives this to a member of staff on the day. If your child needs to take any travel sickness tablets please provide the tablets in a named envelope with any instructions.

We are very excited about this trip which will help to consolidate the learning the children will experience this term.

Many thanks

Miss Hamilton, Mr Caple and Mr Norton

(Year 6 Teachers)



AQUILA
Diocese of Canterbury
Academies Trust



Trip to The Houses of Parliament

To Year 6 Teachers,

I give permission for my child _____ to go to the Houses of Parliament on Monday 20th February 2017.

I have paid £14.50 via Parent Pay/ Paypoint to cover the cost of the coach.

I give permission for any medical/emergency treatment or anaesthetic to be given in case of an accident, injury or illness.

Emergency Contact Details:

Name: _____ Number _____

If you are entitled to Free School Meals please indicate whether you require a free packed lunch.
(Please tick)

- Free Packed lunch required
- Free Packed lunch not required.

Signed _____