

Learning and Growing Together

17/02/2017

Cannon Hall Farm Visit
Tuesday, 07 March 2017
Trip Leader - Miss Sigsworth

Dear Parent / Carer,

As part of our spring topic, we will be visiting Cannon Hall farm.

The children will need a packed lunch. They **are not** allowed to bring; products containing nuts or any nuts (as other children may be allergic to them), chocolate, sweets, energy drinks, fizzy pop, glass bottles or cans.

The children should wear warm outdoor clothing and have a waterproof coat and sensible shoes. The children should wear appropriate clothing for a farm visit.

The cost of the trip is £15.00 this includes entry, guided tour, coach travel and insurance and can be paid via Parent Pay by **Wednesday, 01 March 2017**.

Plan for the day:

08:40am	Children arrive in school
9:00am	Depart from school
10:00am	Arrive at farm
	Guided Tour
	Small animal petting
12:00noon	Lunch time
	Milking demonstration
	Animal feeding
	Sheep and Ferret racing
2:00pm	Depart farm
3:00pm	Arrive back at school

Transport will be provided by **Swifts Happy Days Travel**.

Miss Sigsworth will contact you if we believe that the coach will arrive at a different time. Please provide the telephone number you may be contacted on, if required.

The slip below must be returned by Wednesday, 01 March 2017.

Yours sincerely

J Harris
Headteacher

Cannon Hall Farm Visit 07/03/2017

Childs Full Name _____ **Class** _____

I confirm that:

- I have received the information about the trip & give permission for my son / daughter to visit Place of Trip on Date and I understand that the children will be taking part in the activities specified in the letter.
- I understand that my child must arrive at school by **8.40am** and will not arrive back until **3:00pm**.
- I have paid the £15.00 via Parent Pay.
- There are no changes to the School visits parental consent form filled in in September 2016 (unless detailed below)
- I have spoken to my son / daughter about behaving responsibly on the trip and confirm that they will.

Print Name _____ **Relationship to child** _____

Signed _____ **Date** _____

Contact Telephone number _____

Medical Conditions - Please complete if your child has a medical condition

My son / daughter suffers from			
Medicine required		Side effects	
Additional information you feel we need to know			

Print Name _____ **Relationship to child** _____

Signed _____ **Date** _____

Parental Consent Form – Update

Please **only** complete if there have been **any changes** that we have not been informed about.

Childs Name		Class	
Your Name		Relationship to Child	
New Mobile Number		New Home Number	
New Work Number		Any other new numbers	



There are a limited number of spaces for adult helpers. If you are interested in joining us on our school visit please complete the slip below. Please be aware that the numbers are limited and we will contact you once all letters have been returned.

Name: _____

Child's name: _____

I will / will not be able to support on the school visit to Cannon Hall Farm.

Thank you for your continued support and help,

Foundation Team

