



Dear Parent/ Carer,

We are pleased to confirm the new date for the Chester Zoo trip.

The visit will now take place on **Tuesday, 20th June 2023** and we will be leaving school promptly at **9am** (Children to be on the yard for **8:45am**). We anticipate arriving back at school at **3:15pm**. We will be travelling by coach.

All children will need to be in full school uniform and wearing comfortable footwear and no spending money will be necessary as we will not be visiting the shop.

If your child requires a packed lunch from school please indicate on the form below. Therefore, if you pay for school dinners please ensure that you pay the usual £2.56 a meal onto your child's account or alternatively pay £12.80 for the week via Parentpay.

The school governors have agreed funding educational visits each half term and the cost of parental contributions will be **£7 per half term**.

If you have previously paid for this trip, you do not need to do anything further.

Otherwise the trip will also need to be paid for via Parentpay. If you would prefer to pay via Paypoint then please contact the office for a barcoded letter to take to your nearest outlet to make the payment. **Please note this barcode will be for this trip only, a different barcode is provided for every payment item i.e. each trip which is unique to your child's account.**

Please ensure that **any medication** that your child needs is clearly labelled with their name and dosage requirements and that the teachers are aware that your child has the medication with them.

We cannot accept verbal permission therefore if you do not return the form below your child will not be able to attend the visit.

Thank you for your continued support,

The year 3 team

I give / do not (please indicate) give my child _____ permission to attend the school visit to on

I have paid £7.00 onto my child's Parentpay account - YES/ NO

I would like my child to have:- (please tick one of the boxes below)

Packed lunch from **school**- Tuna Cheese

Packed lunch from **home**-

Signed _____ Date _____

Contact telephone number _____