

## Warren Park Primary School

Sandleford Road, Havant, Hampshire PO9 4LR Telephone (023) 9247 5502 Fax (023) 9249 8399

Headteacher: Mrs Elizabeth Cooper



Dear Year 5 parent/carers,

As previously communicated, we will be taking the children on a celebration trip to Southsea Beach on Wednesday 10<sup>th</sup> July 2024. We will depart school at approximately 9.30am and will return in time for the end of school.

For your child to enjoy this day, please may we ask for the following:

- Clothing school standard PE kit (shorts or trousers and school t-shirt); sensible footwear
- Sun Safety sun-cream to be applied before coming to school; sun hat to wear and plenty of fluid to drink

We are asking for a contribution of £3.50 for this trip. Payment should be made via cash to the office in a named envelope along with the attached permission slip.

If your child needs travel sickness tablets, please ensure that they take them before school starts and that another is supplied for the return journey.

Please see the attached slip to order your child's lunch.

The trip must be paid for and lunch order forms returned together by Wednesday 3rd July 2024 in order for us to organise it effectively.

Yours faithfully

Year 5 team

www.warrenpark.hants.sch.uk 🧮 Hampshire County Council Listen, Think, Learn and Enjoy!



Date .....

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Warren Park Primary School	Southsea beach trip – Year 5
Child's name Chi	ld's class
I give permission for my child to attend the Year 5	beach trip on Wednesday 10th July 2024
Your child will require a packed lunch in a small, clearly will provide your own lunch for your child or b) that you child is entitled to free meals. A MEAL REQUIREMENT No bottles, chocolate, sweets or spending money.	will require the school to provide a lunch c) your
A meal preference must be indicated	
$\square$ I will provide my own lunch for my child	
$\square$ I would like to order a school packed lunc	h and have paid £2.40 for this via Arbor
☐ My child is entitled to free school meals	
☐ I would like to order a school lunch. Pleadist below ☐ Tuna ☐ Cheese ☐ Jam ☐ Ham	ease choose the sandwich filling from the
My emergency contact number for the day will	be
Any medical conditions that the school should b	e aware of
Parent/Carer nameParen	t/Carer signature

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