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Head of School: Ms R Taunt

Chief Executive: Mr B Spinks

3 May 2024

Dear Parent/Carer

## **Year 1 Trip to Kew Gardens**

To consolidate the children's learning and understanding of our current science topic, Plants, we have organised a trip to Kew Gardens on Monday 20 May 2024. During this trip, children will be provided with opportunities to observe and compare a range of different plants and flowers.

The trip will take place on Monday 20 May 2024. We will be travelling by coach and leaving the school at 9:15am. Please make sure your child arrives to school on time as we will not be able to delay the leaving time. Children should be picked up from school at the normal time of 3:20pm. If we are running late, we will let the school know.

This trip will cost £13, which will cover the cost of both the coach and entry to Kew Gardens. This will be payable via ParentPay only. This payment must be made no later than Friday 10 May. Please do not give cash to any class teachers as they will not be able to accept this form of payment. If there are any issues with this method, please inform the front office who can support.

If your child is entitled to free school meals, please tick the box below (and complete form overleaf) if you wish the school to provide a packed lunch (please provide a bottle of water). Otherwise, you will have to provide a packed lunch yourself for your child (please no chocolate, food that contains nuts or fizzy drinks) in a plastic carrier bag for easy disposal.

We are looking for **6 parent helpers for this trip**. This will be on a first-come first-serve basis. If you are able to come with us, please see any of the year 1 teachers.

Yours sincerely,	
Year 1 team	
Please complete and return to your child's class teacher by <u>lat</u>	
I give consent for my child to attend the Year 1 trip to Kew Ga	ardens on Monday 20th May 2024
Child's name:	Class:
Emergency contact number:	Signed:
Please note any medical (asthma etc.) or allergies that your chi	ild has:

My child is entitled to FSM and I would like the school to provide a packed lunch Yes / No IF YES - Please complete the attached form.





## **Packed Lunch Order Form**

To be completed by the sci	hool:	
School trip location		School trip date
To be completed by the pare	ont:	
Name of child	Year group	
Child dietary allergies		
Parent / guardian signatur	re	
Date		
My child requires a p	packed lunch Yes	No ¤
If yes, please select one of	f the following:	
Cheese Farmhouse Roll Allergens: Gluten, milk	Please tick your choice	
Ham Farmhouse Roll Allergens: Gluten	0	
Tuna Mayonnaise Roll Allergens: Gluten, fish, e	eggs	
The packed lunch will also Carrot & cucumber sticks	include:	

Fresh fruit

Homemade biscuit, cookie or shortbread Allergens: Gluten

