

Thursday 12th February 2026

Dear Parents,



Weald & Downland Museum

As part of our history learning about Anglo-Saxons, Year 4 will be visiting Weald & Downland Living Museum. This visit will take place on Thursday 26th March 2026. The party leader of this visit will be Miss Hathaway-Timms, with the additional support of our learning support assistants.

We will be travelling by coach. We will be having lunch at the venue, so children need to bring in a packed lunch and a water bottle.

The children will need to wear school uniform but should wear trainers instead of school shoes. The children also require wellington boots (in a carrier bag) and a raincoat.

A contribution of £24 is requested to contribute towards the cost of the travel and workshops for the trip. As a school we have heavily subsidised the cost to parents as we believe this is a fantastic experience for the children. If insufficient contributions are received, the visit may have to be cancelled. Payment should be made via ScoPay.

Please complete the attached consent form and return to the school office alongside the ScoPay online payment no later than Friday 27th February 2026, in order for us to finalise our arrangements.

No child can be permitted to make the visit without completed consent forms with current medical information.

Yours sincerely,



Mr Daniel Mills

Headteacher



PERMISSION SLIP TO BE RETURNED TO THE SCHOOL WITH YOUR CONTRIBUTION BY FRIDAY 27th FEBRUARY 2026

CHILD'S NAME: _____

CLASS: Year 4

- I would like my child to take part
- I have paid the £24 contribution via ScoPay

My contact number on that day will be _____

- I confirm that my child is in good health.
- I need to discuss my child's health prior to the visit.
- My child needs to take medication with him/her on the visit. I will ensure that this is discussed in advance of the day of the visit and the school's medical form has been completed.
- I understand my child will need to be in school on time as the coach will depart on time.
- In the event of any illness or accident, I consent to any medical treatment, which might include the use of anaesthetics.

SIGNED: _____

Date: _____