



Dear Parent/Carers

Woodpeckers/Eagles Trips for 2<sup>nd</sup> Half Summer Term

Please find below details of trips and activities for the 2nd part of the summer term, a voluntary Contribution per child would be appreciated.

Unfortunately, due to the increase costs involved, if we do not receive enough contributions the activity will need to be cancelled.

Venue and Date	Timing	Activity	Required Clothing	Other items required	Voluntary contribution
<p><b>Jordan's Close</b></p> <p><b>Tuesday 10<sup>th</sup> July</b></p>	<p>We will leave at 9am sharp. All children will need to be in school at 8.45am. We will be back for the end of the school day.</p>	<p>Cookery Team games – to develop co-operation and communication skills. Canoeing</p>	<p>Old clothes - Old shoes (trainers, walking boots/shoes, no sandals) Waterproof Jacket</p>	<p>Spare set of clothes, including underwear in a named carrier bag. Sun tan lotion and a hat</p>	<p>£10.00</p>

Payments can be made by cash or cheque (payable to Great Barford Primary Academy) or by direct payment to the school NATWEST bank account.

**Account name:** Great Barford Primary Academy

**Sort Code:** 60-02-13      **Account number:** 71205462

Please reference your payment with your child's name.

Please feel free to speak to Mrs Evans in confidence if you have any concerns regarding payment.

Please could you complete the school permission slip and return it to the school office in an envelope with your child's name, class and trip name by **Wednesday 4<sup>th</sup> July 2018.**

Yours faithfully

Mrs Browning  
Class Teacher

Great Barford Primary Academy  
Silver Street, Great Barford Beds, MK44 3JU Tel: 01234 870342 E-mail:admin@gbpa.org.uk

Great Barford Primary Academy is part of Unity Church of England Academy Trust, a charitable company limited by guarantee and registered in England and Wales with company number 7563436.



Please complete the table below as applicable and return this slip to school by **Wednesday 4<sup>th</sup> July**.

Having read all the information provided, I agree to my child taking part in any or all of the activities described.

Child's Name	Activity	Date	Contribution Cash/cheque	Contribution bank Transfer	Authorised Signature
	Jordan's Close <b>Tuesday</b> <b>10<sup>th</sup> July</b>				

**Please tick or cross accordingly:**

I am available to help with Jordan's Close

I have a DBS

I have completed Safeguarding training

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