



Dear Parent/Carer

Eagles Trip for 1st half Summer Term

Please find below details of the Eagles trip and activities for the 1st part of the summer term, a voluntary contribution per child would be appreciated.

Unfortunately, due to the increase in the costs involved, if we do not receive enough contributions the activity may have to be cancelled.

Jordan's Close Tuesday 22nd May	Children must be in school at 8.45am as we will leave school at 9am. We will return by 3.20pm.	Outdoor and adventurous activities including: Canoeing, outdoor cooking, team building activities to develop co-operation and communication skills	Old clothes including: Full length trousers, old shoes (trainers, walking boots/shoes, no sandals) Waterproof jacket if rain is forecast.	Spare set of clothes, including underwear in a named carrier bag. Towel.	£10.00
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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 contact Mrs Evans in confidence if you have any concerns regarding payment.

Please could you complete the school permission slip and payment return it to the school office in an envelope with your child's name, class and trip name or if you are making a direct payment please email your permission slip to admin@gbpa.org.uk by **Friday 4th May**.

Yours faithfully
Mrs Criddle
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.





Parental Consent Form

Please return to the school office by Friday 4th May.

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	Tuesday 22 nd May			

Please tick or cross accordingly:

I am available to Jordan's Close

☐

I have a DBS

☐

I have completed Safeguarding training

☐

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