

BIDSTON AVENUE PRIMARY SCHOOL

'Achieving Together'

Tollemache Road, Birkenhead, Wirral, CH41 0DQ
Tel: (0151) 652 1594
Fax: (0151) 653 2064
Email: schooloffice@bidstonavenue.wirral.sch.uk
Web: <http://www.bidstonavenue.wirral.sch.uk>



HEADTEACHER: Mr. S.G. Brady B.Ed. (Hons), NPQH, FCCT

1st October 2024

Dear Parents/Carers

Year 3 visit to Tatton Park

To link with our history topic on Stone Age and Bronze Age, we would like to take the children to visit Tatton Park on **Tuesday 5th November**. We will have the opportunity to learn about the way humans lived in the past and what we can learn from them.

We will be leaving school at approx. **9.00 a.m.** and will return by **3.15 p.m.** The cost of the trip is £12.50 per child including transport. If your child is Pupil Premium there is a charge of £6.00 for the trip.

Children will need a packed lunch for the day. Free school meals will be provided. Please ensure your child wears their **Bidston Avenue uniform** so that we are easily recognisable as a group. Your child will need to wear **sensible shoes, a labelled waterproof coat and water bottle**. No pocket money will be required.

Please sign the attached **permission slip**. We would be grateful if you could return the permission slip and make your payment via ParentPay **by Friday 11th October 2024**.

Yours sincerely,

S G Brady
Headteacher

Twitter: @Bidstonavenue, @icctfunlearning & @BAPS_PE





BIDSTON AVENUE PRIMARY SCHOOL

Year 3 SCHOOL VISIT

School visit to: **Tatton Park** Date of Trip: **Tuesday 5th November 2024**

I agree to my son/daughter/ward

Full name: _____ Class: _____

taking part in the above-mentioned visit and having read the letter, agree to his/her participation to any or all of the activities described. I acknowledge the need for obedience and responsible behaviour on his/her part. **Please ensure that if your child suffers with asthma that they take their inhaler with them on this trip.**

I understand that the teacher in charge of the party will be acting in loco parentis and in the event of an accident I agree to my son, daughter, ward receiving emergency medical treatment, which might include the use of anaesthetic and blood transfusions, as considered necessary by the medical authorities present.

I understand that Wirral Borough Council is insured in respect of its legal liabilities only and that there is no Personal Accident, or other cover, unless I have been advised specifically by the organiser.

Accidents may therefore arise for which the Council is not responsible. Parents/Carers may wish to obtain suitable insurance to cover such eventualities.

Signed: _____ Parent/Carer

Tel. No: _____ Date: _____

- I will provide a packed lunch from home My child requires a school packed lunch
- I have paid for the trip on ParentPay, £12.50. (£6.00 charge for Pupil Premium)

(please tick as appropriate)

**PLEASE RETURN TO SCHOOL AS SOON AS POSSIBLE.
IF THIS FORM IS NOT RETURNED PRIOR TO THE DATE OF THE TRIP YOUR CHILD
WILL NOT BE ABLE TO TAKE PART.**