

**MEADOW LANE INFANT SCHOOL
TRIP TO NEW WALK MUSEUM, LEICESTER FOR
CLASSES 1, 2 & 7**

23 February 2016

Dear Parents/Carers

We are planning an educational visit to New Walk Museum in Leicester, when we will be looking around the museum and taking part in some Egyptian workshops which support the children's topic work. The visit will take place on Tuesday 15 March 2016. We shall be leaving at approximately 9.15 am and returning for 3.20 pm.

As part of the universal free school meals initiative we provide a free packed lunch for the children on visits. We would like all the children to have a packed lunch which will include the following: A wholemeal bread cheese, ham or strawberry jam sandwich, a yoghurt, a cake and some fruit. Drinks are not included, so these should be provided by parents/carers. (No fizzy drinks please). **Please indicate on the slip below which sandwich filling you require for your child and return to school by Friday 4 March 2016. Please note, there can be no exceptions to this as the Cook Supervisor has to work to a deadline in terms of orders.**

In order for the visit to take place, we would ask you for a voluntary contribution of £8.00 to cover the cost of the visit and transport. (Cash or cheques made payable to Meadow Lane Infant School). The School Fund is subsidising the visit but obviously if we do not receive sufficient payments from parents/carers the visit would be unable to go ahead. We also need adult support on this outing, if you can help please tick the slip below and we will confirm this with you before the visit.

Yours sincerely

**Gail Roy
Class Teacher**

**VISIT TO NEW WALK MUSEUM, LEICESTER -
CLASSES 1, 2 & 7**

I give permission for: (Name) (Class)
to go on the trip on Tuesday 15 March 2016.

**I would like to order a *Cheese/Ham/Strawberry jam sandwich for lunch.
*(Please delete as appropriate).**

Medical Information: Does your child suffer from any conditions of which the teacher leading the visit should be aware YES/NO.

If YES, please give brief details, including details of any medication

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For accounting purposes please indicate if you are enclosing money with this slip.

Please indicate if you can help on the trip.

Signed..... Date.....