

Learn Today for Tomorrow's Success

Fallings Park Primary School

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Dear Parent/Carer 19th February 2024

Year 3 Residential - Edgmond Hall

A 1 night residential visit to <u>Edgmond Hall</u> has been planned for our Year 3 pupils. During this stay, children take part in two days of exciting outdoor activities. Your child will sleep overnight in a dormitory style room supervised by their teachers from school.

Edgmond Hall offers an unforgettable opportunity to teach life skills, build confidence and create a better understanding of the world. Spending time away from home can also offer children a chance to embrace adventure, take calculated risks, face new challenges, and build self-esteem.

When: Monday 1st – Tuesday 2nd July 2024 3SE and ½ of 3CW

Tuesday 2nd July – Wednesday 3rd July 2024 3JF and ½ of 3CW

Depart: Day One – 9am Return Day Two – 3.15pm

Where: Edgmond Hall, Shropshire, TF10 8JY

Travel: Travelling to Edgmond Hall by coach, children will be supervised at all times.

Catering: On the first day of the residential children will require a packed lunch. They will

then be provided will an evening meal. On day two, children will be provided

with breakfast and a hot lunch before returning to school.

The total cost per child for this visit is £124. School budgets **CANNOT** fund this visit and therefore we are asking for £84 per pupil for this visit to go ahead. A **deposit of £44** will be **required by 1**st **April**, with **8 weekly instalments of £5 thereafter**. This can be paid through your School Comms Account or via Barcode at your local newsagent (if you would like to pay via Pay Point, please visit the office for a bar coded letter). **Please note these payments will be paid directly to the venue and therefore are non-refundable.**

Please note this visit will not go ahead if we do not receive enough payments.









Please complete and return the attached consent form to confirm your child's place on the visit by Thursday 28th March 2024.

Yours Faithfully

Miss Heywood

Miss Heywood Year Leader (Year 3)

Enc Permission Form Parent Information Sheet (which includes kit list)

Residential Consent Form

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|---------------------------------------|-------------------------|-----------------|--------------|
| Student Name | | | |
| Class | | | |
| Date of Birth | | | |
| Home Address | | | |
| | | | |
| | | | |
| | • | | |
| | Emergency | Contact Details | |
| | | | |
| CONTACT 1 Name | Telephone Number | | е |
| Relationship to Child | | Number | |
| | | | |
| CONTACT 2 | | Telephone | |
| Relationship to Child | | Number | |
| | | | |
| Medical Conditions | T | | |
| (Please inform us of any | | | |
| medical conditions) | | | |
| Does your child take any | | | |
| regular medication that will | | | |
| require administering on their visit? | | | |
| If yes please provide details | | | |
| | | | |
| Dietary Needs | | | Please Tick |
| | None | | |
| | Vegetarian | | |
| | Vegan No Beef | | |
| | No Pork | | |
| | Other (Please state) | | |
| | 2 3 (| | |
| I hereby provide consent for n | ny son/daughter to atte | end the reside | ntial visit. |
| Signed: | | | |
| Date: | | | |