**Summer Half-Term 1 Reward Trip**

Parents/ Carers,

As part of our continued push on the importance of attendance (and in response to student voice), I am delighted to inform you that we are running a reward trip to Weston Super-Mare which will take place on **Wednesday 23rd May 2018.** The aim of the trip is to reward students who achieve 100% attendance over the next fortnight- this includes 100% of all lessons in school.

Students need to arrive at school at 8.30 am; staff will greet them and transport them via minibus to Weston. The visit will be fully supervised but students will have an enjoyable day and will get the opportunity to see all of the major seafront attractions in the town. Your child does not have to wear uniform but will of course be expected to behave according to our code of conduct at all times. We would suggest that your son/daughter wears clothes suitable for sporting activities and brings some clothing suitable for wet weather. We will provide a free packed lunch for all students on the trip- you may wish to provide your son/daughter with a small amount of spending money for additional refreshments throughout the day however. Students are expected to return to school at 5pm.

I would be grateful if you could return the reply slip below by Friday May 18th- in any cases prior to the day of the trip where students no longer meet the criteria for attending the trip, your child’s tutor will call you and discuss the withdrawal reasons with you. Any further questions in the meantime, please let me know.

Yours faithfully,

Andrew Wakefield

Principal

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**PLEASE RETURN THIS REPLY SLIP TO MR PRICE via reception**

I give consent for my child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Form: \_\_\_\_\_\_\_\_\_ to attend the trip on **Wednesday 23rd May.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent/carer)

Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent/carer)

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please indicate below whether your child has any medical or dietary requirements we need to be aware of.***

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