

WILLINGTON PRIMARY SCHOOL

Trent Avenue, Willington, Derbyshire. DE65 6DN

Telephone: 01283 702156

Email: info@willington.derbyshire.sch.uk

Website: www.willington.derbyshire.sch.uk

Headteacher: Mrs A. Gallimore

Friday 20th October

Dear Parents/ Guardians,

YEAR 1 AND 2 VISIT TO SEE THE GINGERBREAD MAN AT DERBY THEATRE – Tuesday 5th December 2017

Last year all the children in Year 1 and Year 2 went to Derby Theatre to see a wonderful production of Jack and the Beanstalk. As we received some very positive feedback from children and adults alike we have decided to visit the theatre again this Christmas to see The Gingerbread Man. This play will involve live acting, singing, puppets and musicians creating a story with original live music, costumes and creative sets.

The show begins at 1:30 and so we will be leaving school at approximately 12:30, travelling by buses to the venue. The show will last for around 50 minutes, so we will aim to be back at school for 3:30, but updates will be posted on Twitter or ParentHub should our return time change. Children will be having their lunch slightly earlier than normal, and can have their usual hot school dinner or sandwiches.

Children will need to wear their full school uniform for the visit and do not need to bring any money with them on the day.

The cost of the visit will be £12.50 per child. Please be aware that if we don't receive sufficient funds the visit will be unable to go ahead. If your child has been in receipt of Free School Meals in the past or is receiving them now you are entitled to a discounted rate. Please contact Mrs Gallimore for details of the discount.

Please ensure that all forms and payments are returned to school by Monday 6th November.

Many thanks for your continued support,



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Miss Lucy Cope and Miss Laura Pritchard

YEAR 1 AND 2 – VISIT TO Derby Theatre – Tuesday 5th December 2017

Child's Name

a. I give my permission for my child to take part in the above visit and I enclose my voluntary contribution of £12.50

b. Does your child need to take travel sickness medication? Yes No

(If so, please ensure that he/she takes this before the initial journey and, if necessary, send the correct dosage with instructions in a named envelope for the return journey.)

c. Does your child need an inhaler? Yes No
(If so, ensure that he/she has this for the day.)

d. Has your child any other medical conditions that staff would need to know about for this visit? Yes No

e. I accept that whilst my child is in the care of the school, the staff stand in the position of the parent and that they may, therefore, need to arrange any medical aid considered necessary in an emergency, but I will be told of any such action as soon as possible.

f. On the day of the visit, I can be contacted at the following address(es) / telephone number(s) :

Times	Contact Address	Tel. No.



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Signed:

Date:.....

