



# MARVELS LANE PRIMARY SCHOOL

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SE12 9RA

Headteacher: Edward Dove  
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4<sup>th</sup> June 2019

Dear Parents/Carers of Birch Class,

As part of our learning programme this block, we will be visiting Horniman Museum on Friday 12<sup>th</sup> July 2019. The children will be exploring the museum and taking part in a workshop.

Children are expected to wear school uniform. Your child will also need a packed lunch. You can provide your own lunch from home (no sweets, fizzy drinks or glass bottles please), or request a school packed lunch (consisting of a sandwich, a snack, a piece of fruit and a bottle of water).

We will be travelling there by public transport, leaving school after registration and returning to school in time for the end of the school day at 3:15pm. If this changes on the day we will let you know via text message so please ensure your mobile phone number is up-to-date.

The main cost of school trips are met from school funds, however you are asked to make a contribution of £5.00. We prefer that you pay online using ParentPay, but if you are unable to do this please send the correct money in the attached envelope.

Please complete the permission slip below and return it to the school by 27<sup>th</sup> June, indicating clearly whether you are providing your own packed lunch or a school packed lunch and whether you are able to accompany us on the trip.

Yours faithfully,

*Mrs Vitty*

Class Teacher

**Year 1 Class Trip - Horniman Museum (Friday 12<sup>th</sup> July)**  
**MUST BE RETURNED TO SCHOOL NO LATER THAN 27<sup>th</sup> JUNE**

I give permission for my child .....in Birch class to participate in the educational visit to Horniman Museum.

1) I require a School Packed Lunch	<input type="checkbox"/>	I will provide a Home Packed Lunch	<input type="checkbox"/>
2) I have paid online using ParentPay	<input type="checkbox"/>	I enclose £5.00 (correct money only please)	<input type="checkbox"/>
3) I can accompany you on the trip	<input type="checkbox"/>		

Signed: .....

(Parent/Carer)

Print Name:.....

Date: .....

For Office Use:

Paid:

Not Paid: