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12<sup>th</sup> May 2023

Dear parents/carers,

To contribute to our Science learning this term, Year 5 are visiting **Think Tank Science Museum** on **Tuesday 18<sup>th</sup> July**.

The children will travel to and from Think Tank on coach, expecting to arrive back to school for 3.30pm. The children will be collected from their usual exit point.

During our visit to Think Tank, the children will be visiting the planetarium for a workshop about space and the solar system to consolidate their topic of Space in relation to Greek astronomers in addition to a 'Forces and Friction' workshop for their Science learning of forces in Summer 2.

Your child is required to bring a packed lunch and water bottle for the day. If your child is in receipt of free school meals and you would like for them to have a lunch provided from the school kitchens, please indicate on the slip below.

The cost of this experience is **£25** per child, to be **paid no later than Monday 3<sup>rd</sup> July 2023**, via ParentPay.

I hope that as in the past we can rely on parent support for this kind of venture; but, should sufficient contributions not be received it will be unfortunately necessary to abandon our plans. If this were to happen, we will refund any monies paid.

Thank you for your continued support.

Mrs C. Gibbins  
Head of school



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**Year 5 – Think Tank Visit – Tuesday 18<sup>th</sup> July**

Name of Child: \_\_\_\_\_

Class \_\_\_\_\_

I do / do not give permission for my child to take part in the Think Tank Visit and travel by coach. *(please delete as appropriate)*

**Please tick your preferred payment option.**

I confirm that I have paid £25.00 **in full** on ParentPay.

I confirm that I will make a deposit payment of £12.50 in advance of 3<sup>rd</sup> June 2023,  
Followed by a top-up payment of £12.50 (full payment) in advance of 3<sup>rd</sup> July 2023.

**Please tick or highlight your lunch preference.**

•  I will provide a packed lunch for my child.

**OR**

•  My child is in receipt of free school meals so I request a packed lunch to be provided by the school.

***If you chose this option, please ensure that your child has a water bottle.***

**Emergency contact name and number:**

\_\_\_\_\_

**Medical needs**

\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_