



Believe, Strive, Achieve

Winklebury Federation

Willoughby Way, Basingstoke, Hants RG23 8AF

Head of Federation: Mrs S. Mathlin

Tel: 01256 323244

E-mail: adminoffice@winklebury-inf.hants.sch.uk

E-mail: adminoffice@winklebury-jun.hants.sch.uk

Year 5 Trip to Winchester Science Centre and Planetarium – Tuesday 13th May 2025

Dear Parents

During the summer term our Year 5 theme is based on space. The focus of our trip is to explore the planets and stars in the planetarium and use our knowledge of forces, that we will be learning in the summer term, to design and make a rocket that blasts off! The children will also have the opportunity to investigate the exhibits on both floors.

The cost per child is **£16.75** in order to cover the cost of the coach and museum entry. Whilst your contributions are voluntary, please be aware we have to rely on them to offer off-site activities for the children. If insufficient contributions are received we may not be able to continue with our arrangements. Thank you for your understanding.

The children will travel by coach, leaving at approximately 9.15am and returning to school at around 3.00pm. The children will be accompanied by their class teachers, other members of staff and additional adults, all of whom will have been briefed about the planned learning experiences, all health and safety matters and our expectations of the children's behaviour whilst out of school. As on any other day, your point of contact for the day is the Federation Admin Office.

The children **do need to wear their school uniform on the day** they are visiting the Centre.

Children will need a packed lunch in a disposable bag that is named. The children may also wish to bring a water bottle. If your child is entitled to **free school meals** the school can provide him/her with a packed lunch for the day. Please indicate on the attached slip if you wish the school to provide a packed lunch for your child on the day of the trip.

No spending money or cameras are required for this visit.

Please complete and return the attached form to give permission for your child to take part in the activity as soon as possible but by **Friday 2nd May at the latest**.

Please note that if we feel that your child's in-school behaviour may be liable to put themselves or others at risk whilst we are off the school site, we will have to consider whether he/she is able to go on the trip and we may have to refuse to take him/her with us. If we feel we will be unable to take your child on the trip we will contact you to discuss this and any monies you have paid will be refunded. If unable to go on the trip, your child should come to school as usual and provision will be made for him/her in another class for the day.

Yours sincerely

Mrs K Murphy & Mrs S Davis
Year 5 Classteachers

FEDERATION OF WINKLEBURY INFANT AND JUNIOR SCHOOLS

Educational visit information and consent form

Please complete all the information below

Activity: Year 5 Trip to Winchester Science Museum and Planetarium

Date: Tuesday 13th May

Personal details

Child's name Class

Date of birth Age

Next of kin address during the activity (if different from above)

..... Post code.....

Contact number: Home.....WorkMobile

Parental consent

I confirm that I have parental responsibility for.....

He/she is in good health and I consider him/her to be capable of taking part in the activities as set out in your letter dated I acknowledge I can view a copy of the insurance synopsis on request at the school. I consent to him/her taking part in the activity.

In the event of illness or accident, I consent to any necessary medical treatment, which might include the use of anaesthetics.

Signed

Please print name

AddressPost code

Medical information

Has your child had any of the following?

Asthma or bronchitis	Yes/ No	Allergies to any known medication	Yes/ No
Any other allergies e.g. food, materials	Yes/ No	Fits, fainting or blackouts	Yes/ No
Other illness or disability	Yes/ No	Severe headaches	Yes/ No
Travel sickness	Yes/ No	Diabetes	Yes/ No
Regular medication	Yes /No	Heart condition	Yes/ No

If the answer to any of these questions is Yes, please give details.....

If it is considered necessary, do you agree to mild painkillers (e.g. Paracetamol) being administered? **Yes / No**

Has your child received vaccination against tetanus? **Yes / No**

Is your child receiving medical or surgical treatment of any kind from either their family doctor or hospital? **Yes/No**

Has your child been given specific medical advice to follow in emergencies? **Yes/ No**

If the answer to either of the last two questions is Yes, please give details including the name and dosage of any medication.....
...

In the event of any illness or medical treatment occurring after the return of this form and prior to the activity, I undertake to inform my child's class teacher.

Signed(person with parental responsibility)

Please print name here Date

Consent for taking images

During our visit we may take pictures of the activity. These may be used in displays in school or our closed facebook group.

In the event of any images on my child being taken, I consent to them being used **Yes / No**

School packed lunch

I wish to order a school packed lunch

Cheese *Jam*

I will be providing a packed lunch from home

Voluntary contribution

Delete as appropriate:

* I have enclosed a voluntary contribution of £16.75 for the trip to Winchester Science Museum

* I have paid £16.75 online

Signedparent ofinClass