

BGS/sck

24th May 2018

Dear Parents /Carers

Re. Roebuck Academy Arts & Science Day - Thursday 21st June 2018

I am pleased to inform you that your child has been selected to attend an arts & science day with the Year 2 students at Roebuck Academy (St Margarets, Stevenage, SG2 8RG) on Thursday 21st June 2018.

During this fun and rewarding day they will get the opportunity to work with the Year 2 students, demonstrating and developing their own art, science and communication skills.

Students will need to make their own way to and from Roebuck Academy, and will need to arrive by 9am, when I will meet them. They may be collected/make their own way home at 3pm (please indicate which on the attached reply slip).

Students will need to be in full school uniform, and should bring a packed lunch for the day. This will be supplied if your child is in receipt of free school meals.

If you know your son/daughter needs any medication (e.g. inhalers) please ensure they bring this with them – it is imperative to indicate any medical details on the reply slip attached, which should be returned to Mrs Clark in Reception by Friday 8th June 2018. Places are limited and will be awarded on a ‘first come, first served’ basis.

We are proud of our excellent record of exemplary behaviour on trips and visits. Students will be representing our Academy and we expect all to behave and act responsibly. If staff have any concerns about your child’s conduct, their place on the visit will be reviewed.

Should you have any further queries please do not hesitate to contact me. We are looking forward to this enjoyable day.

Yours faithfully

Mrs B S Gibbins

Mrs B.S. Gibbins
Head of DT & Art



REPLY SLIP: Roebuck Academy Arts & Science Day - Thursday 21st June 2018

Please return to Mrs Clark in Reception no later than Friday 8th June 2018.

I confirm that my child in form
will adhere to the academy's behaviour expectations for trips and visits and give permission
for him/her to attend the above named trip.

Any medical/additional information of which the school should be aware (e.g. allergies,
medication, etc.)

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Emergency contact name and telephone number:

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My child will make their own way home after this event

My child will be collected after the event by

(please tick as applicable)

Signed parent/carer* Date

** please delete as applicable.*