



# St Mary's and St John's CE School

*"With God, all things are possible" (Matthew 19:26)*

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*Wisdom Service Hope*

Principal: Martin Serrão BA, MEd (Camb)

Friday 3<sup>rd</sup> May 2019

Dear Parents/Carers

## Year 4 Educational Visit to Moat Mount Outdoor Centre

We are very pleased to inform you about our forthcoming trip to Moat Mount Outdoor Centre in Mill Hill on the **Wednesday 15th May 2019**. The children will be taking part in a range of exciting activities including orienteering and team building games which will support curriculum objectives for PE and PSHE in Year 4.

We will be leaving school straight after registration and travelling by coach from school to the centre. All Children will need to bring a packed lunch – no fizzy drinks, glass bottles or sweets please. **NO NUTS or NUT PRODUCTS**. Please put in a plastic bag for easy disposal.

Children will also need to be suitably dressed for the weather on that day. If it has been raining or is forecast to rain, please provide wellington boots and waterproof clothing. If it is forecast to be very warm, please provide sun protection and sun hats.

There is a voluntary contribution of £20.80; this will cover the cost of the coaches and access to the centre. Payments are only accepted through Parent Pay. Unfortunately, if there is an insufficient amount of contributions the trip will have to be cancelled.

Please complete the slip below highlighting if you are available to help.

Kind regards,

Mrs Styman, Mr Andrews and Miss McCrossan

Year 4 Team

**PLEASE RETURN BY Friday 10<sup>th</sup> MAY 2019**

**Year 4 Educational Visit to Moat Mount Outdoor Centre**

**Child's Name** \_\_\_\_\_ **Class** \_\_\_\_\_

I give permission for my child to attend the Year 4 educational visit to Moat Mount Outdoor Centre  
Wednesday 15th May 2019.

**Parent's Name** \_\_\_\_\_ **Contact Telephone Number** \_\_\_\_\_

I am available to help on the trip.

Name and contact number of adult collecting child if different from parent:

Name of adult collecting child \_\_\_\_\_

Contact Telephone Number \_\_\_\_\_

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_