



Bryn Offa Church of England Primary School

Rockwell Lane, Pant, Oswestry, Shropshire, SY10 9QR
admin@brynoffa.shropshire.sch.uk
Tel: 01691 830621

Acting Headteacher: Mr G Jones

Wednesday 13th March 2024

Dear Parent/Carer,

Year 5 John Muir Sessions

As part of our continued outdoor provision at Bryn Offa, we are offering the Year 5 pupils the opportunity to take part in some activities that will lead to them achieving the John Muir award at the end of Year 6. This involves discovering a wild place, exploring it, completing some conservation work of the location and then sharing the work that has been completed with other children.

The sessions will take place on the following dates:

- * Tuesday 19th March (the children will be in school for lunch on this day and will not need a packed lunch)
- * Tuesday 23rd April
- * Tuesday 7th May

Please could you ensure that your child has the following in school on these days:

- Walking boots or old trainers;
- Old clothing (that you don't mind getting a little dirty);
- A warm, waterproof coat, scarf, hat and gloves (if weather is cold)
- Their water bottle
- A packed lunch (only required for sessions on 23rd April and 7th May)
- A small rucksack to carry the packed lunch (not a carrier bag please) (only required for sessions on 23rd April and 7th May)

****If you would like to order a school packed lunch for the sessions on 23rd April and 7th May, please indicate this on the consent form before returning it to school****

* please turn over

Your child can wear their old clothing to school on these days and do not need to come to school in their normal uniform. A reminder will be sent out to parents on prior to the dates above.

I would be grateful if you could complete the consent form attached and return it to school by **Friday 15th March** to confirm that you are happy for your child to be taken offsite on these days. They will of course be carefully supervised.

Yours sincerely,

Mr Jones
Acting Headteacher

****To be returned to school by Friday 15th March****

PARENTAL CONSENT SLIP
Year 5 John Muir Activities

Child's full name:.....

(1) Consent

I *give/do not give consent for my child to take part in the John Muir sessions and for them to be taken off site during the sessions.

(2) Medical treatment

Please give details of any medical conditions that apply to your child (e.g. asthma, allergies to food, pollen, stings, plasters etc).

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*I consent/do not consent to any first aid treatment that may be necessary.

(3) School Packed Lunch

* I would like the school to prepare a packed lunch for my child

* I do not need the school to prepare a packed lunch for my child

** Please delete or tick above as necessary*

Parent/Guardian name (please print)

Parent/Guardian signatureDate:.....

Emergency contact number for day of visits.....