ASHILL VC PRIMARY SCHOOL

The Oaks, Ashill, Thetford, Norfolk, IP25 7AP Tel/Fax – 01760 440403

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Website: www.ashillschool.co.uk

Headteacher: Mr Dan Pickard

Dear Parents/Carers

RE - TRIP TO SANDRINGHAM HOUSE & GARDENS

Hedgehog Class are studying about the United Kingdom as their topic this term, a visit to Sandringham has been arranged for Thursday 2nd October 2025. We will be leaving from School at approximately 9.10am and returning before the end of the school day.

The fee for this visit is £578.00 (including the travel costs) and we would ask for a contribution of £13.50 per child. However, if after paying all costs there is a sum left equivalent to 50p per child or less, this will be added to School Funds. Should you wish your share to be returned to you if less than 50p please let us know in writing. If the balance is over 50p this will be automatically returned to you. The PTA are kindly paying the transport costs of £175.00 but if we do not cover the cost of the trip via parental contributions then, unfortunately, this will not be able to go ahead.

A few notes:

- School uniform should be worn with appropriate footwear and outdoor clothing if necessary.
- School-based inhalers will be taken by staff.
- If your child is travel sick, please dose before school and let me know in advance.
- A packed lunch will be required. If you would like the school to provide a packed lunch please indicate this on the permission slip and ensure this is returned to Mrs Butters by the date stipulated (Friday 26th September). If the permission slip is received after this date the School will be unable to supply a packed lunch. However please note that packed lunches are usually sent up the day before and stored in a fridge overnight.

If you could return the attached permission slip as soon as possible but by Friday 26th September at the latest this would be appreciated. Please remember if we do not receive a permission slip your child will not be allowed to go on the trip.

Please note that should there be media coverage of this event we do not have control over how any photos taken will be used and should you wish to object to the use of photos by any such media, you should contact them direct. Finally, you have already given consent for photos to be taken by school staff but if you wish to withdraw this consent, please fill out a Withdrawal of Photo Consent Form available in the school foyer or from Mrs Butters.

Yours sincerely

Mrs C Filby Hedgehog Class Teacher











PARENTAL CONSENT FORM

Please return to: MRS BUTTERS The Visit Leader will only divulge information on this form to other staff as necessary, to ensure the welfare and safety of the participant. **GROUP:** Hedgehog Class PLACE OF VISIT: Sandringham House & Gardens REASON FOR VISIT: Enhance Learning Thursday 2nd October 2025 DATE AND TIMES: DEADLINE FOR PACK UPS: Friday 26th September 2025 MODE OF TRANSPORT: Coach To be completed by the Parent/Guardian ____ in Hedgehog Class I am willing for my child ___ to take part in the above visit/journey and, having read the information provided, I agree to his/her taking part in the activities described. ☐ I have paid for this trip on School Money ☐ My child is entitled to free school meals and I would like a school packed lunch to be provided. ☐ My child would like a school packed lunch to be provided at a cost of £2.70 and will be paid via School Money. I fully understand and accept that, while the supervisory adults in charge of the group will take all reasonable care of the young people, neither they, nor Norfolk County Council, can necessarily be held liable in respect of loss or damage to property or injury suffered by my child arising out of the educational visit/journey, unless such loss, damage or injury results from the negligence of Norfolk County Council, its employees or official volunteers. Please note, if your child/ward requires emergency treatment and this is in the vital interests of the child, we will act in loco parentis, and your child will receive appropriate medical attention. I understand the extent and limitations of the insurance cover provided. Signature of Parent/Guardian: _____ Should there be any amendments to this form after it has been handed in, please contact the Visit Leader immediately.









