

Dear Parents/Carers

**RE: YEAR 5 FOREST SCHOOL CLUB**

Year 5 Forest School (FS) club will take place on **Tuesdays** throughout ***Term 4 only***.

Due to the nature of the activities, the children will need:

* Long sleeved top and trousers - there are lots of brambles and nettles about (these items of clothing may get very dirty – please only send play clothes). Please ensure the clothing is thick enough to prevent scratches/stings
* A waterproof coat and trousers – we go out in all weathers apart from exceedingly high winds and/or lightning. **Waterproof trousers to all sessions please** – there will be mud!
* Wellies/sturdy outdoor shoes- Wellies are good for wet and mud but definitely not warm so please send extra socks in cold weather (children can wear other appropriate play shoes in dry weather)

***Please contact me via email, copying the completed slip below, if you wish to book your child on to Forest School club by Friday 20th Jan. I will email confirmation once the deadline has passed. Contact details:*** ***valair1@hotmail.com***

The cost is £ 8.00 per session running from 3.15 – 5:00pm (4 sessions in total - £ 32) with snacks provided. The first session will be on Tuesday 21st Feb and the last on Tuesday 14th March.

At the end of the session, I will bring the children out of the woodland side gate onto the pavement adjacent to the carpark.

Mrs Sarah Webb

Forest School Leader

**07825 610145**

If your child would like to participate in Forest School, please email this slip to valair1@hotmail.com along with payment via BACS: Mrs S V Webb, Account No. 11051187, Sort: 08 92 86. If unable to pay via BACs, then please contact me to arrange a cash payment. Please ensure payment is made by the week beginning 6th Feb.

Child’s name: Class:

Parent Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical and/or Dietary needs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Numbers: 1)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your child making their own way home? Yes/No

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent/Carer)