

Dear Parents/Carers

**RE: YEAR 5 FOREST SCHOOL CLUB**

Year 5 Forest School (FS) club will take place on **Tuesdays** throughout Terms 1&2.

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)
* Head torch – for the last 2/3 weeks as the light fades

***Please contact me via email, copying the completed slip below, if you wish to book your child on to Forest School club by Wednesday 22nd September. I will email confirmation once the deadline has passed. Contact details:*** [***valair1@hotmail.com***](mailto:valair1@hotmail.com)

The cost is £ 6.50 per session running from 3.15 – 5:00pm (9 sessions in total - £58.50) with snacks provided. The first session will be on Tuesday 28th September and the last on Tuesday 30th November. All sessions will take place outdoors in the Conservation Area (although we may explore other areas of the school grounds from time to time).

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](mailto:valair1@hotmail.com) along with payment, preferably via BACS: Mrs S V Webb, Account No. 11051187, Sort: 08 92 86. If unable to pay via BACs, then please send cash or a cheque payable to Mrs S V Webb. Please ensure payment is made by the week beginning 4th October.

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)