



**Rye Community Primary School & Starfish Pre-school**  
**The Grove, Rye, East Sussex TN31 7ND**  
**[www.ryeprimary.co.uk](http://www.ryeprimary.co.uk)**  
Executive Headteacher: Mr Barry Blakelock  
Headteacher: Miss Kelly Martin  
[office@ryeprimary.co.uk](mailto:office@ryeprimary.co.uk)  
01797 222825



9<sup>th</sup> June 2023

Dear Parent/Carer,

The Year 2 children have been given the opportunity to have a cricket lesson at the Rye Cricket Club on the Thursday 22<sup>nd</sup> June 2023.

The children will need to come to school wearing their PE kit and their school jumper. Please ensure you child has a sun hat, water bottle and has sun cream applied before they come to school.

There is no cost for this trip and, as we will be back at school on time, lunch arrangements will continue as normal.

Please complete the attached permission form and return this to the school office or class before Monday 19th June.

Kind regards

Miss Brewster and Miss Birkby



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**Please return by Monday 19<sup>th</sup> June 2023.**

I give permission for my child ..... (Name) to participate in a cricket lesson at Rye Cricket Club Thursday 22<sup>nd</sup> June 2023.

Signed..... Parent/Guardian

**Medical form**

<b>Does your child suffer from any allergy, illness or disability?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes please provide further details, including any prescribed medication, times and doses.		
<b>Do you consent to your child receiving first aid during the school trip?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Do you consent to your child receiving urgent care during the school trip, including the use of anaesthesia, if deemed necessary by medical professionals?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>I can confirm that the information I have provided within this form is accurate. I am also happy for my child to receive first aid or urgent medical care whilst on a school trip or activity.</b>	
Name of parent	
Emergency contact number one	
Name of contact	
Emergency contact number two	

**Permission form**

<b>By signing this form, I agree to the terms outlined in the letter that enables my child to participate in all of the listed school trips attached to this form.</b>	
Name of pupil	
Year group	
Name of parent	
Signed	
Date	