



# Joy Lane Primary School

*A Love of Learning, for Life, for All*

KS/fcp

Oyster Bay Nursery & Oysters SRP (ASD)

Executive Headteacher: Ms DJ Hines

Head of School: Mr M Ashley-Jones

Tuesday 13<sup>th</sup> October 2015

Dear Parents/Carers of **Pupils in Year 5**

## French Pen Pal Visit – Friday 16<sup>th</sup> October 2015

The Year 5 pupils from L'école Montesquie, Dainville will be joining us this Friday for their annual visit. They will be meeting us at Whitstable Harbour mid-morning. The children will have a wander around the harbour and will then have a special visit from the Lady Mayoress.

We are walking to the harbour to meet our pen pals and will return to School for a slightly later lunchtime of 1:30pm. We will still have the opportunity to eat a hot lunch with our pen pals and their teachers. The children will need a substantial healthy snack and drinks to keep up their energy levels until lunch. Ms Hines has kindly agreed to pay for the cost of lunch on this day.

Pupil **should wear school uniform** and suitable footwear for walking to and from the harbour. They will also need to bring a coat.

On our return, we will have the opportunity to Skype our pen pals regularly and hopefully visit them in Dainville in the summer term.

Many thanks for your support

Yours sincerely

*R Cliff*

Mr R Cliff

*S Broadbent*

Miss S Broadbent

*Year 5 Class Teachers*

*K Stanley*

Mrs K Stanley

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## French Pen Pal Visit – Friday 16<sup>th</sup> October 2015

I give permission for ..... (child's name)

of ..... (child's class) to take part in the visit.

**(please tick as appropriate)**

My child would like a hot lunch on return to School

I will be providing my child with a packed lunch

Should the necessity arise I agree to the person in charge of the trip giving consent on my behalf for an anaesthetic to be administered or for any other medical treatment to be given. If your child has a Medical Care Plan, a copy will be included in our visit paperwork.

My emergency contact number for the day is .....

Parent / Carer Signature: ..... Date: .....

TripsVisits/Year5/Harbour/Oct2015/fcp



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