



Thurton

Church of England VC Primary School



5th October 2015

Event: Evacuee Poppy Line train experience
Venue: Sheringham/Holt

Date: Wednesday 21st Oct
Times: 8.30am – 3.30pm

Thurton Church of England VC Primary School

Ashby Road, Thurton,
Norfolk, NR14 6AT

e: office@thurton.norfolk.sch.uk
t: 01508 480335

Headteacher:
Mrs Cassandra Williams

Deputy Head:
Mr Jonathan Barber

Chair of Governors:
Mrs Maggie Coe

Vicar:
Rev Chris Ellis

Dear Parents / Carers,

I have organised for the children to experience life as an evacuee on **Wednesday 21st October 2015** by taking a trip on the Poppy Line steam train between Sheringham Park and Kelling Heath in Holt. There will be no requirement to wear school uniform for the trip but the children (and adults!) will need to be wearing typical 1940's dress!

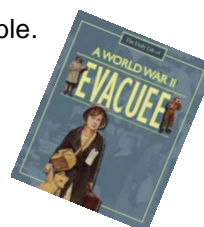
We will be leaving school by coach at **8:40am** to travel to Sheringham and returning to school at approx. **3:30pm**. Please ensure your child is at school in good time as we will leave promptly. *(We are expected at Sheringham Station at 10:15)* The trip includes a typical evacuee lunch so no packed lunches will be required that day but please note below if your child has any special dietary requirements that need to be taken into consideration.

The PTA has kindly offered to pay for the coach in order to keep the cost down. We are asking for a contribution of £10.80 which is the cost of the train ticket and event only. *This is a voluntary contribution but if we are unable to cover the cost of the trip then it will not be possible to go ahead.*

Please return the permission slip with your payment as soon as possible.

Many thanks,

Mr Barber
Class Teacher



✂.....
Event: Evacuee Poppy Line train experience **Date: Wednesday 21st Oct**
Venue: Sheringham/Holt **Times: 8.30am – 3.30pm**

Name of child/ren.....

I confirm that my child/ren can take part in the above event and I understand that they will be travelling to and from the event by coach.

My child will need to take the following medication with them on the visit:.....

My child has the following dietary requirements.....

My contact number will be

SignedDated

