October 2018

Dear Parents/Carers,

**Y2 ‘SING THE CHRISTMAS STORY’ VISIT**

We are delighted to announce that we have again been invited to sing alongside other local schools in the ‘Sing the Christmas Story’ project. The visit will allow Y2 children to experience traditional carols as well as current music. There will be musicians to accompany the event and the children will be asked to participate in singing several songs.

This exciting opportunity will take place on **Friday 7th December** at Chester Cathedral, 1.30 – 2.30pm. The children will be transported to the Cathedral by coach at 12.45pm and they should arrive back at school in time for normal pick up. They will eat their lunch before they leave, can you please provide them with an extra drink in a plastic container. Children must wear school uniform, showerproof coat and sensible shoes for walking.

Due to the large numbers of children taking part and the limited capacity of the cathedral, it will not be possible to invite parents and carers to attend the performance. However, we will need a small number of parent helpers to assist on the visit and would be grateful if you would indicate your availability on the reply slip below. Parents will be informed if they are required to help.

The cost of the visit is £7.00 (non-refundable). Payment should be made using our online payment system, ParentPay. (If you need an activation code to set up your account, please contact the school office).

Please sign the permission slip below and return to school by **Friday 2nd November 2018**. Should you have any further queries, please do not hesitate to contact us directly.

Yours sincerely,

**Y2 Team**

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RETURN BY**: Friday 2nd November 2018**

**WOODLANDS PRIMARY SCHOOL**

**Y2 ‘Sing the Christmas Story’ Visit**

CHILD’S NAME……………………………………..….………………………………….… CLASS…………………………………..

* I give permission for my child to attend the ‘Sing the Christmas Story’ Visit on **Friday 7th December 2018**
* I confirm that I have paid £7.00 (**non refundable**) online via Parentpay.
* I can / cannot help with this trip (please delete as appropriate).

Please note here if your child has any medical condition or allergies we need to be aware of:

……………………………………………………………………………………………………………………..………………………………

Parents mobile / contact number……………………………………………………………………………..………………………………

Signature………………………………………..……………………….…………………………… Date:……..…………………………….