



St. John's CE Primary School

Growing and learning together
Sharing the love of God

Headteacher: **Amanda Aze**
Chair of Local Advisory Board: **Vivien Sloan**

Coombe Avenue, Weymouth, Dorset, DT4 7TP
Email: office@stjohnswey.dsat.org.uk
Website: www.stjohns.dsat.org.uk
Tel: 01305 785711

23rd June 2021

Dear Parents/ Carer

Year 2 Visit to St John's Church and Weymouth Beach

As part of this year's RE/ Arts week, Year 2 will be visiting St John's church on Wednesday 30th June 2021. We will be walking to St John's Church, leaving school at 9.00am, where we will be met by Reverend Tom Coopey who will take us on a tour of the recent refurbishments.

In addition to visiting the church, as part of our current geography topic, we will be taking the opportunity to visit Weymouth Beach. During our time at the beach, we will be exploring the question 'How can we improve the local area?' we will also take some time to complete a traffic survey. We will leave the beach at 12.00pm to ensure we are back at school in time for lunch. **To ensure our trip can go ahead, we will require some additional adults to help us. Please indicate on the reply slip below if you are able to offer your morning to help. If you are required, you will be contacted by the class teacher with additional information. Thank you in advance.**

On the day of the trip, as we will be doing lots of walking, please ensure your child is wearing comfy shoes e.g. trainers and dressed in full school uniform. Weather dependant, please provide a waterproof coat or sun hat and sun cream (applied at home).

Please complete/delete the reply slip below as necessary, and return to Miss Williams by Monday 28th June. Thank you.

Kind regards,

Miss Williams
Year 2 Teacher



Year 2 Visit to St John's Church and Weymouth Beach Wednesday 30th June 2021. Please complete/delete as necessary and return to Miss Williams by Monday 28th June. Thank you.

I give permission for my child _____ to visit St John's Church and Weymouth Beach on Wednesday 30th June.

I am / I am not able to help on the trip.

I consent to any medical treatment deemed necessary during the course of the visit.

Emergency Contact Name 1: _____ Relationship to child: _____

Telephone number 1: _____

Emergency Contact Name 2: _____ Relationship to child: _____

Telephone number 2: _____

Signed: _____ Parent/Carer



Date: _____

Diocese of Salisbury
Academy Trust
'Beyond expectations for all of God's children'